# Exhibit E

## IN THE UNITED STATES DISTRICT COURT FOR THE DISTRICT OF MARYLAND (Northern Division)

DAVID J. BOSHEA \*

Plaintiff,

\* Case No. 1:21-CV-00309-ELH

v.

\*

COMPASS MARKETING, INC.

\*

Defendant.

\*

\* \* \* \* \* \* \* \* \* \* \*

## DEFENDANT COMPASS MARKETING, INC.'S RESPONSES TO PLAINTIFF DAVID J. BOSHEA'S FIRST SET OF REQUESTS FOR PRODUCTION OF DOCUMENTS

Defendant Compass Marketing, Inc. ("Defendant" or "Compass"), by and through its undersigned counsel and pursuant to Rule 34 of the Federal Rules of Civil Procedure and the Local Rules of this Court, hereby responds to the First Request for Production of Documents propounded by Plaintiff David J. Boshea ("Plaintiff" or "Boshea"), as follows:

#### **GENERAL OBJECTIONS**

The following General Objections are part of the response to each and every Request and are set forth here to avoid the duplication of restating each General Objection in each specific response. The General Objections may be specifically referred to in responses to certain Requests for the purpose of clarity. However, the failure to specifically incorporate a General Objection into a response should not be construed as a waiver of any of the General Objections.

A. Compass objects to each Request to the extent that it seeks to impose obligations on Compass that are inconsistent with or greater than the obligations imposed by the Federal Rules, any other applicable law, or any court order that governs discovery in this case.

- B. Compass objects to each Request to the extent that it seeks information that is not discoverable under applicable law.
- C. Compass objects to each Request to the extent that it is over broad, unduly burdensome, or vexatious.
- D. Compass objects to each Request to the extent that it is vague and ambiguous or it does not describe the information sought with sufficient particularity.
- E. Compass objects to each Request to the extent that it seeks information that is neither relevant to the issues raised in this lawsuit nor reasonably calculated to lead to the discovery of admissible evidence. Nothing herein shall be construed as an admission by Compass with respect to the admissibility or relevance of any fact or document, or as an admission of the truth or accuracy of any characterization, description, or definition contained in Boshea's Requests.
  - F. Compass objects to each Request to the extent that it is cumulative.
- G. Compass objects to each Request to the extent that Boshea has not provided sufficient information regarding the specific factual and/or legal bases of his claims to allow Compass to respond to the Request.
- H. Compass objects to each Request to the extent that it seeks information that is subject to the attorney-client, work product, or other privilege, immunity or protection under any and all applicable law.
- I. Compass objects to each Request to the extent that it is not limited in geography, time, or scope, or, if there is such a limitation, the limitation is not reasonable.
- J. Compass objects to each Request to the extent that it seeks information that is not within Compass' possession, custody, or control and to the extent that it requires Compass to respond on behalf of persons or entities not under Compass control.

- K. Compass objects to each Request to the extent 'that it seeks information that contains trade secrets, proprietary or other confidential information, or is subject to confidentiality agreements, protective orders, or statutorily mandated confidentiality provisions.
- L. Compass objects to each Request to the extent that it seeks information contained in electronic documents, including email, and the effort to restore or otherwise retrieve such electronic documents imposes and undue burden on Compass in terms of time and expense, among other things, that is inconsistent with or greater than the obligations imposed by the Federal Rules, any other applicable law, or any court order that governs discovery in this case. To the extent that Compass is obligated to restore or otherwise retrieve such electronic documents, Compass reserves the right to recover costs associated with such effort from Boshea.
- M. In addition to the objections listed above, Compass reserves the right to make further objections and assertions of privilege as applicable.

#### PRELIMINARY STATEMENT

- a. The information supplied in these responses is not based solely upon the knowledge of the responding party, but includes the knowledge of the party's agents, representatives and attorneys, unless privileged.
- b. The word usage and the sentence structure is that of the attorneys who in fact prepared these responses and said language does not purport to be the exact language of the responding party.
- c. To the extent that documents are deemed to be in Compass' possession, custody, or control by virtue of Compass' attorneys obtaining documents from third parties, such documents should be deemed produced by Compass and are incorporated herein by reference, even if such documents not specifically identified as being produced in any response herein.

- d. Compass' investigation and development of all facts and circumstances relating to this action is ongoing. These responses and objections are made without prejudice to, and are not a waiver of, Compass' right to rely on other facts or documents at trial.
- e. By making the accompanying responses and objections to Boshea's requests for documents and interrogatory, Compass does not waive, and hereby expressly reserves, its right to assert any and all objections as to the admissibility of such responses into evidence in this action, or in any other proceedings, on any and all grounds including, but not limited to, competency, relevancy, materiality, and privilege. Further, Compass makes the responses and objections herein without in any way implying that it considers the requests and interrogatory, and responses to the requests and interrogatory, to be relevant or material to the subject matter of this action.
- f. Compass will produce responsive documents only to the extent that such documents are in the possession, custody, or control of Compass Marketing, Inc, as set forth in the Federal Rules of Civil Procedure. Compass' possession, custody, or control does not include any constructive possession that may be conferred by Compass' right or power to compel the production of documents or information from third parties or to request their production from others.
- g. A response to a document request or interrogatory stating that objections and/or indicating that documents will be produced shall not be deemed or construed that there are, in fact, responsive documents, that Compass performed any of the acts described in the document request, interrogatory, or definitions and/or instructions applicable to the document request or interrogatory, or that Compass acquiesces in the characterization of the conduct or activities contained in the document request, interrogatory, or definitions and/or instructions applicable to the document request or interrogatory.

- h. Compass expressly reserves the right to supplement, clarify, revise, or correct any or all of the responses and objections herein, and to assert additional objections or privileges, in one or more subsequent supplemental response(s).
- i. As a threshold matter, Compass is limited in its ability to provide information potentially responsive to Plaintiffs' Interrogatories. In or about July 2019, Michael White, who had been terminated from employment in November 2018, together with his son, George White, as administrators of Compass domain for electronic communications and documents, compassmarketinginc.com (the ".com domain"), prevented and continues to prevent Compass from accessing the records in the .com domain. Indeed, after July 2019, Compass had to create a new domain, compassmarketinginc.net, and at great effort and expense migrate its operations and communications networks to this new domain. Compass has had access to some incoming communications to the .com domain since July 2019 and will include those communications in its search for potentially responsive information.

#### **RESPONSES**

<u>Document Request No. 1</u>: All Documents and ESI, including any email or other Communications, that the Defendant believes it might introduce at the trial or any hearing in this lawsuit.

**RESPONSE:** Compass objects to Request No. 1 on the grounds that it is vague and ambiguous, overbroad and unduly burdensome, and it is premature to determine which documents may be used at trial in this matter. In addition, see General Objection J and L, as well as Preliminary Statement i. Subject to and without waiving these objections, Compass responds as follows:

Responsive documents that are in Compass' possession, custody, and control will be produced.

<u>Document Request No. 2</u>: All Documents and ESI that relate to or include any Statement by a witness or other person regarding the matters asserted in the pleadings in this lawsuit, or any interview of said witness or person.

**RESPONSE:** Compass objects to Request No. 2 on the grounds that it is vague and ambiguous and overbroad and unduly burdensome. In addition, see General Objection J and L, as well as Preliminary Statement i. Subject to and without waiving these objections, Compass responds as follows:

Responsive documents that are in Compass' possession, custody, and control will be produced.

**Document Request No. 3:** Boshea's Personnel File.

**RESPONSE:** See General Objection J and L, as well as Preliminary Statement i. Subject to and without waiving these objections, Compass responds as follows:

Responsive documents that are in Compass' possession, custody, and control will be produced.

**<u>Document Request No. 4</u>**: All Documents and ESI, including any email or other Communications, that relate to Boshea's Personnel File.

**RESPONSE:** Compass objects to Request No. 4 on the grounds that it is vague and ambiguous, overbroad and unduly burdensome, and it seeks information that is not relevant to the claims in this litigation. In addition, see General Objection J and L, as well as Preliminary Statement i. Subject to and without waiving these objections, Compass responds as follows:

Responsive documents that are in Compass' possession, custody, and control will be produced.

<u>Document Request No. 5</u>: All Documents and ESI, including any email or other Communications, between Boshea and Compass concerning the terms of Boshea's employment.

**RESPONSE:** Compass objects to Request No. 5 on the grounds that it is vague and ambiguous, overbroad and unduly burdensome, and it seeks information that is not relevant to the claims in this litigation. In addition, see General Objection J and L, as well as Preliminary Statement i. Subject to and without waiving these objections, Compass responds as follows:

Responsive documents that are in Compass' possession, custody, and control will be produced.

<u>Document Request No. 6</u>: All Documents and ESI, including any email or other Communications, between Boshea and Compass concerning Boshea's duties for or at the direction of Compass.

**RESPONSE:** Compass objects to Request No. 6 on the grounds that it is vague and ambiguous, overbroad and unduly burdensome, and it seeks information that is not relevant to the claims in this litigation. In addition, see General Objection J and L, as well as Preliminary Statement i. Subject to and without waiving these objections, Compass responds as follows:

Responsive documents that are in Compass' possession, custody, and control will be produced.

<u>Document Request No. 7</u>: All Documents and ESI, including any email or other Communications, that relate to any business dealings between Boshea and the Defendant.

**RESPONSE:** Compass objects to Request No. 7 on the grounds that it is vague and ambiguous, overbroad and unduly burdensome, and it seeks information that is not relevant to the claims in this litigation. In addition, see General Objection J and L, as well as Preliminary Statement i. Subject to and without waiving these objections, Compass responds as follows:

Responsive documents that are in Compass' possession, custody, and control will be produced.

<u>Document Request No. 8</u>: All Documents and ESI, including any email or other Communications, concerning the Defendant's termination of Boshea's employment.

**RESPONSE:** Compass objects to Request No. 8 on the grounds that it is vague and ambiguous, overbroad and unduly burdensome, and it seeks information that is not relevant to the claims in this litigation. In addition, see General Objection J and L, as well as Preliminary Statement i. Subject to and without waiving these objections, Compass responds as follows:

Responsive documents that are in Compass' possession, custody, and control will be produced.

<u>Document Request No. 9</u>: All Documents and ESI, including any email or other Communications, concerning the Defendant's reason or reasons for terminating Boshea's employment.

**RESPONSE:** Compass objects to Request No. 9 on the grounds that it is vague and ambiguous, overbroad and unduly burdensome, and it seeks information that is not relevant to the claims in this litigation. In addition, see General Objection J and L, as well as Preliminary Statement i. Subject to and without waiving these objections, Compass responds as follows:

Responsive documents that are in Compass' possession, custody, and control will be produced.

<u>Document Request No. 10</u>: All Documents and ESI, including any email or other Communications, concerning any bona fide disputes between Boshea and the Defendant.

**RESPONSE:** Compass objects to Request No. 10 on the grounds that it is vague and ambiguous, overbroad and unduly burdensome, and it seeks information that is not relevant to the claims in this litigation. In addition, see General Objection J and L, as well as Preliminary Statement i. Subject to and without waiving these objections, Compass responds as follows:

Responsive documents that are in Compass' possession, custody, and control will be produced.

<u>Document Request No. 11</u>: All Documents and ESI, including any email or other Communications, concerning any breach by Boshea of any agreement between Boshea and the Defendant.

**RESPONSE:** Compass objects to Request No. 11 on the grounds that it is vague and ambiguous, overbroad and unduly burdensome, and it seeks information that is not relevant to the claims in this litigation. In addition, see General Objection J and L, as well as Preliminary Statement i. Subject to and without waiving these objections, Compass responds as follows:

Responsive documents that are in Compass' possession, custody, and control will be produced.

<u>Document Request No. 12</u>: All Documents and ESI, including any email or other Communications, that support the Defendant's affirmative defense that Boshea's claims are barred in whole or in part by unclean hands.

**RESPONSE:** Compass objects to Request No. 12 on the grounds that it is vague and ambiguous and overbroad and unduly burdensome. In addition, see General Objection J and L, as well as Preliminary Statement i. Subject to and without waiving these objections, Compass responds as follows:

Responsive documents that are in Compass' possession, custody, and control will be produced.

<u>Document Request No. 13</u>: All Documents and ESI, including any email or other Communications, that support the Defendant's affirmative defense that Boshea's claims are barred in whole or in part by fraud.

**RESPONSE:** Compass objects to Request No. 13 on the grounds that it is vague and ambiguous and overbroad and unduly burdensome. In addition, see General Objection J and L, as well as Preliminary Statement i. Subject to and without waiving these objections, Compass responds as follows:

Responsive documents that are in Compass' possession, custody, and control will be produced.

<u>Document Request No. 14</u>: All Documents and ESI, including any email or other Communications, that support the Defendant's affirmative defense that Boshea's claims are barred in whole or in part by estoppel.

**RESPONSE:** Compass objects to Request No. 14 on the grounds that it is vague and ambiguous and overbroad and unduly burdensome. In addition, see General Objection J and L, as well as Preliminary Statement i. Subject to and without waiving these objections, Compass responds as follows:

Responsive documents that are in Compass' possession, custody, and control will be produced.

<u>Document Request No. 15</u>: All Documents and ESI, including any email or other Communications, that support the Defendant's denial of the allegations contained in paragraph 19 of the Complaint.

**RESPONSE:** Compass objects to Request No. 15 on the grounds that it is vague and ambiguous, overbroad and unduly burdensome, and it seeks information that is not relevant to the claims in this litigation. In addition, see General Objection J and L, as well as Preliminary Statement i. Subject to and without waiving these objections, Compass responds as follows:

Responsive documents that are in Compass' possession, custody, and control will be produced.

<u>Document Request No. 16</u>: All Documents and ESI that relate or include the working papers, notes, calculations, exhibits, reports, and observations, prepared, or reviewed by each expert witness whom the Defendant contemplates may testify on behalf of the Defendant at any trial or hearing of this lawsuit.

**RESPONSE:** Compass objects to Request No. 16 on the grounds that it is overbroad and unduly burdensome and it is premature to make any determinations regarding any potential expert witness. In addition, see General Objection J and L, as well as Preliminary Statement i. Subject to and without waiving these objections, Compass will supplement this Response if/when it designates an expert witness.

<u>Document Request No. 17</u>: All Documents and ESI that relate or include the report of each expert witness reports that the Defendant contemplates or intends to introduce at the trial or other hearing of this lawsuit.

**RESPONSE:** See Response to Request No. 16.

<u>Document Request No. 18</u>: The current curriculum vitae or resume of each witness who has first-hand knowledge about matters relevant to the Complaint, any of the Defendant's affirmative defenses or both.

**RESPONSE:** Compass objects to Request No. 18 on the grounds that it seeks information that is not relevant to any claim or defense in this litigation, it is overbroad and unduly burdensome, and it is vexatious. To the extent that the Request is intended to apply only to expert witnesses, see Response to Request No. 16.

<u>Document Request No. 19</u>: The current curriculum vitae or resume of each expert witness the Defendant may call to testify.

**RESPONSE:** See Response to Request No. 16.

<u>Document Request No. 20</u>: All Documents and ESI that relate or include the conclusions and opinions of each expert witness and the bases thereof.

**RESPONSE:** See Response to Request No. 16. In addition, Compass objects on the grounds the request is vague and ambiguous.

<u>Document Request No. 21</u>: All Documents and ESI, including any email or other Communications, reviewed by each witness whom the Defendant contemplates may testify on behalf of the Defendant at any trial or hearing in this lawsuit.

**RESPONSE:** Compass objects to Request No. 21 on the grounds that it is vague and ambiguous, overbroad and unduly burdensome, vexatious, and it seeks information that is not relevant to the claims in this litigation. Subject to and without waiving these objections, Compass responds as follows:

Responsive documents that are in Compass' possession, custody, and control will be produced.

<u>Document Request No. 22</u>: All Documents and ESI that relate or include any fee agreement involving the Defendant and each expert witness.

**RESPONSE:** See Response to Request No. 16.

<u>Document Request No. 23</u>: All Documents and ESI, including any email or other Communications, that relate to the Defendant's failure to pay amounts demanded by Plaintiff.

**RESPONSE:** Compass objects to Request No. 23 on the grounds that it is vague and ambiguous and seeks information that is not relevant to the claims in this litigation. In addition, see General Objection J and L, as well as Preliminary Statement i. Subject to and without waiving these objections, Compass responds as follows:

Responsive documents that are in Compass' possession, custody, and control will be produced.

<u>Document Request No. 24</u>: All Documents and ESI, including any email or other Communications, that relate to any defenses the Defendant believes it possesses or may possess in this lawsuit.

**RESPONSE:** Compass objects to Request No. 24 on the grounds that it is vague and ambiguous and overbroad and unduly burdensome. In addition, see General Objection J and L, as well as Preliminary Statement i. Subject to and without waiving these objections, Compass responds as follows:

Responsive documents that are in Compass' possession, custody, and control will be produced.

Dated: July 22, 2021 Respectfully submitted,

/s/ Stephen B. Stern\_

Stephen B. Stern, Bar No.: 25335 Heather K. Yeung, Bar No.: 20050

KAGAN STERN MARINELLO & BEARD, LLC

238 West Street

Annapolis, Maryland 21401 (Phone): (410) 216-7900 (Fax): (410) 705-0836

Email: <a href="mailto:stern@kaganstern.com">stern@kaganstern.com</a>
Email: <a href="mailto:yeung@kaganstern.com">yeung@kaganstern.com</a>

Counsel for Defendant Compass Marketing, Inc.

### **CERTIFICATE OF SERVICE**

I HEREBY CERTIFY that on the 22nd day of July, 2021, that a true and correct copy of the foregoing Responses to Plaintiff's First Set of Requests for Production of Documents was served upon the following counsel of record via email:

Thomas J. Gagliardo Gilbert Employment Law, PC 1100 Wayne Avenue, Suite 900 Silver Spring, MD 20910

Email: tgagliardo@gelawyer.com

and

Gregory J. Jordan Mark Zito Jordan & Zito, LLC 55 West Monroe St., Suite 3600 Chicago, IL 60603 Email: gjordan@jz-llc.com

Attorneys for Plaintiff David Boshea

/s/ Stephen B. Stern\_

Stephen B. Stern



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March 2, 2020

David Boshea 4839 Clearwater Lane Naperville, IL 60564

Dear Dave,

Regrettably, your position was one of the positions selected to be eliminated due to a necessary reduction in force. This letter confirms our discussion today that your employment with Compass Marketing Inc will terminate on March 2, 2020.

We appreciate your service to the company, and it is with regret that we must terminate your employment. We want to assist as much as possible during this transition, as we do appreciate your tenure with Compass Marketing.

Below is a breakdown of information that is important for you.

- · You will be paid through your last date of employment.
- You will be paid your unused, accrued vacation pay, if any, together with your last paycheck.
- Your benefits will remain in effect until March 31, 2020. Cobra information will be mailed to you for your review to make the appropriate decision.
- We are offering you a Severance Agreement, which is attached for your review and consideration. You have a period of 45 days to consider it.
- As your termination is based on a generalized Reduction in Force you may qualify for unemployment benefits.

Please review the information above and the attached Severance Agreement and do not hesitate to reach out to Erin Songer with any questions. We thank you so much and wish you great success on your future endeavors.

Sincerely,

John White

CEO

Compass Marketing, Inc.

enclosure

#### SEVERANCE AGREEMENT

Compass Marketing Inc. and David Boshea have reached the following Severance Agreement ("Agreement"). In this Agreement, "Employee" refers to David Boshea and "Company" refers to Compass Marketing Inc., together with any parent or subsidiaries, related and affiliated entities, companies, and the employees, officers, trustees, directors, agents, shareholders, successors, assigns, servants, third party administrators and insurers and any of them.

- 1. Employee's employment with Company is terminated effective March 2, 2020. In consideration for the execution by Employee of this Agreement and for the covenants and promises described below, the Company will pay Employee 80 hours of Severance Pay. Such salary continuation shall be contingent upon the execution and non-revocation of this Agreement, and shall be effective and Employee paid for such continuation within 30 days following the seven (7) day revocation period referred to in paragraph 9 of the Agreement, provided that this Agreement is not revoked. Employee agrees that this payment is more than the Company is required to pay under its policies and procedures.
- 2. Employee states that he has not previously filed or joined in any complaints or charges or lawsuits against Company with any governmental agency or court of law. Employee agrees to and does release the Company from all claims or demands Employee may have based on Employee's employment with the Company or the termination of that employment. This includes a release of any rights or claims Employee may have under the Age Discrimination in Employment Act and the Older Workers Benefit Protection Act, which prohibit age discrimination in employment; 42 U.S.C. § 1981, 1983 and 1985; Title VII of the Civil Rights Act of 1964 as amended, which prohibits discrimination in employment based on race, color, national origin, religion or sex; the Equal Pay Act, which prohibits paying men and women unequal pay for equal work; the Americans with Disabilities Act, which prohibits discrimination against qualified individuals with a disability; the Fair Labor Standards Act, including the Wage and Hour Laws relating to payment of wages; the Family and Medical Leave Act, which provides certain leave of absence benefits to employees; Employment Retirement Income Security Act, which protects certain employee benefits; 85 O.S. §§ 5, 6 and 7 (1991 and 1992 Supp.), preventing discharge in retaliation for exercising rights under Oklahoma's Workers' Compensation Act; or any other federal, state or local laws or regulations prohibiting employment discrimination, including qui tam actions. This also includes a release by Employee of any claims for breach of contract, impairment of economic opportunities, intentional infliction of emotional distress, invasion of privacy, wrongful discharge, discharge in violation of public policy, or that the Company has dealt with Employee unfairly or in bad faith or any other common law contract or tort claim. This release covers both claims that Employee knows about and those he may not know about. Employee also represents that he has not given or sold any portion of any claim discussed in this Agreement to anyone else.
- 3. Employee promises never to file a lawsuit asserting any claims that are released in paragraph 2.
- 4. If Employee breaks his promise in paragraph 3 of this Agreement and files a lawsuit based on legal claims that Employee has released, Employee will pay for all costs incurred by the Company, any related companies or the directors or employees of any of them, including reasonable attorneys' fees, in defending against Employee's claim.
- 5. Company makes this Agreement to avoid the cost of defending against any possible legal action. By making this Agreement, Company does not admit that it has done anything wrong.
- 6. This Agreement does not waive any rights or claims that Employee may have which arise after the date the Employee signs this Agreement.

1

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## Case 1:21-cv-00309-ELH Document 113-15 Filed 07/31/22 Page 16 of 231

- 7. Employee acknowledges that he received an electronic copy of this Agreement and was offered a period of at least forty-five (45) days to consider it.
- 8. Employee is advised to consult with an attorney of his choice before signing this Agreement. Employee agrees, that Company shall not be required to pay any of his attorneys' fees in this or any related matter or lawsuit, now or later, and that the settlement monies received in paragraph 1 are in full and complete settlement of all matters between Employee and Company, including but not limited to, attorney's fees and costs.
- 9. Employee may revoke this Agreement within seven (7) days of his signing it. Revocation can be made by delivering a written notice of revocation to Erin Songer, at 222 Severen Ave, Suite 200, Annapolis MD 21403. For such revocation to be effective, notice must be received no later than 5:00 p.m. on the seventh (7th) calendar day after Employee signs this Agreement. If Employee revokes this Agreement it shall not be effective or enforceable and Employee will not receive the benefits described in paragraph 1.
- 10. Employee acknowledges that as a result of his employment with Company, certain trade secrets and other confidential information of the Company have been disclosed to him. Employee agrees that as partial consideration for this Agreement, that Employee shall not disclose or utilize for his personal benefit, or for the direct or indirect benefit of any other person or entity, or for any other reason, any information, ideas, concepts, improvements, discoveries or other information, whether patentable or not, which have been disclosed to Employee during the time Employee was employed with the Company. In addition, all documents, notes, files, data, records, correspondence, manuals, specifications, computer programs, e-mail, voice mail, electronic data bases, maps and other writings or materials of any type which have been provided to Employee as a result of Employee's employment with or through the Company, are and shall be the sole and exclusive property of the Company. Employee shall promptly deliver all such property, including copies, and the personal property listed on Exhibit "A" attached hereto, to the Company within five (5) business days of the date of this Agreement.
- 11. For a period of two (2) years after the date of this Agreement, Employee shall not solicit, induce or attempt to induce any current customer or employee of the Company or its affiliates to cease doing business in whole or in part with or through the Company or its affiliates or otherwise disrupt any previously established relationship existing between such customer or employee and the Company or its affiliates.
- 12. This is the whole Agreement between Employee and Company. No promises oral or written statement upon which Employee has been told to rely have been made to him other than those in this Agreement. If any portion of this Agreement is found to be unenforceable, then both Employee and the Company desire that all other portions that can be separated from it or appropriately limited in scope shall remain fully valid and enforceable. Each party also agrees that, without receiving further consideration, it will sign and deliver such documents and do anything else that is necessary in the future to make the provisions of this Agreement effective.
- 13. As an express condition of this Agreement, Employee agrees not to take any action that is adverse to Company, or any of its parents, subsidiaries or affiliates, either individually or in concert with others.
- 14. Employee agrees to keep the terms, amount and facts of this Agreement completely confidential, and that he will not disclose any information concerning this agreement to anyone other than immediate family and lawyer(s), who will be informed of and bound by this confidentiality clause.
- 15. This Agreement shall be governed and interpreted in accordance with the laws of the State of Maryland. In the event litigation is instituted between the parties in connection with any controversy or dispute arising from, under or related to this Agreement, the judgment herein should include a reasonable sum to be paid to the prevailing party on account of attorneys' fees incurred in such litigation.

2

CM 0003 CM 0003

#### Case 1:21-cv-00309-ELH Document 113-15 Filed 07/31/22 Page 17 of 231

- 16. This Agreement may be executed in any number of counterparts, each of which shall be deemed an original, but all of which shall together constitute one and the same instrument.
- 17. Company and Employee desire that any dispute concerning this Agreement be handled out of court. Accordingly, they agree that any such dispute shall, as the parties' sole and exclusive remedy, be submitted to arbitration in Maryland, before an experienced employment arbitrator licensed to practice law in Maryland and selected in accordance with the standard rules of the American Arbitration Association (AAA). (Employee understands that he may obtain a copy of such rules by calling the AAA, located in Washington, D.C., directly if Company or Employee's lawyer do not have copies available.) The laws of the State of Maryland shall govern interpretation of this Agreement. Should Employee or Company start any legal action or administrative proceeding against the other with respect to any claim waived by this Agreement, or pursue any method of resolution of a dispute other than mutual agreement of the parties or arbitration, then all damages, costs, expenses and attorneys' fees incurred by the other party as a result shall be the responsibility of the one bringing the suit or starting the procedure.

EMPLOYEE ACKNOWLEDGES THAT HE HAS READ THIS AGREEMENT, UNDERSTANDS IT AND IS VOLUNTARILY ENTERING INTO IT.

PLEASE READ THIS AGREEMENT CAREFULLY. IT CONTAINS A RELEASE BY EMPLOYEE OF ALL KNOWN AND UNKNOWN CLAIMS.

Employee Signature

Date

Date	Witness		
Date	Company Representative		
	Title:		
		NEFITS STATED IN PARAGRAPH N IN FULL FORCE AND EFFECT.	UMBER 1
Date	Employee Signature		

3

CM 0004 CM 0004



Tuesday, September 15, 2015

Dear David Boshea:

At the present time Compass is unable to continue your employment, absent your agreement to accept a reduction in base compensation to an annual amount of \$180,000 (before customary deductions in the categories of your regular payroll deductions, as adjusted to reflect lower base compensation amount).

In the event that we do not receive back your countersigned acceptance of the reduction called for in this letter agreement by Wednesday September 16, your employment will be terminated effective as of the close of business on that date. In the event that we do receive back your countersigned acceptance, then your compensation will be adjusted accordingly.

The terms of this letter agreement will supersede any inconsistencies with any prior agreements regarding the terms of your compensation and cannot be modified unless in writing and signed by us. Your employment shall continue "at will."

We are hopeful, but can provide no assurances, that Compass will be able to generate additional revenue to be able to subsequently initiate a bonus program to increase your compensation to historic levels in the future.

Respectfully,	
LAMO	
John D. White Chief Executive Officer	
Chief Executive Officer	
Employee	

CM 0005 CM 0005

Compass MARKETING

Mike White <mwhite@compassmarketinginc.com>

## Salary reduction

1 message

John White <jwhite@compassmarketinginc.com>

Tue, Sep 15, 2015 at 6:31 PM

To: David Boshea <a href="mailto:dboshea@compassmarketinginc.com">dboshea@compassmarketinginc.com</a>

Cc: Mike White <mwhite@compassmarketinginc.com>, Daniel White <dwhite@compassmarketinginc.com>

Dave,

See attached per our conversation. Sorry Dave

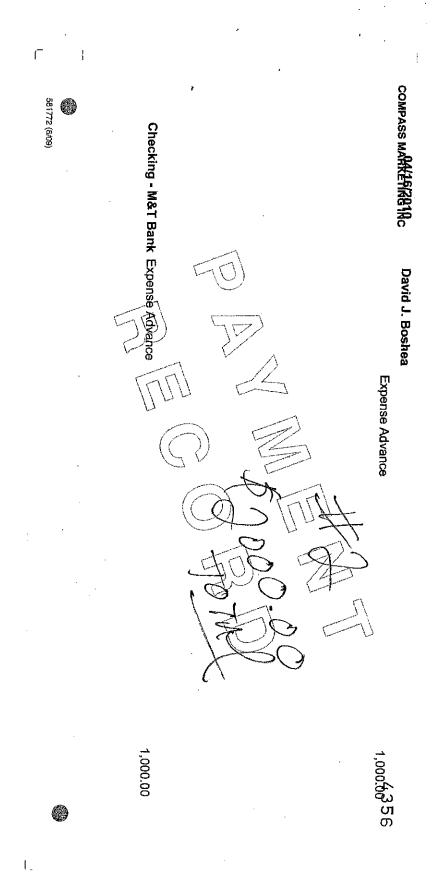
John

John White Chairman/CEO Compass Marketing Inc.

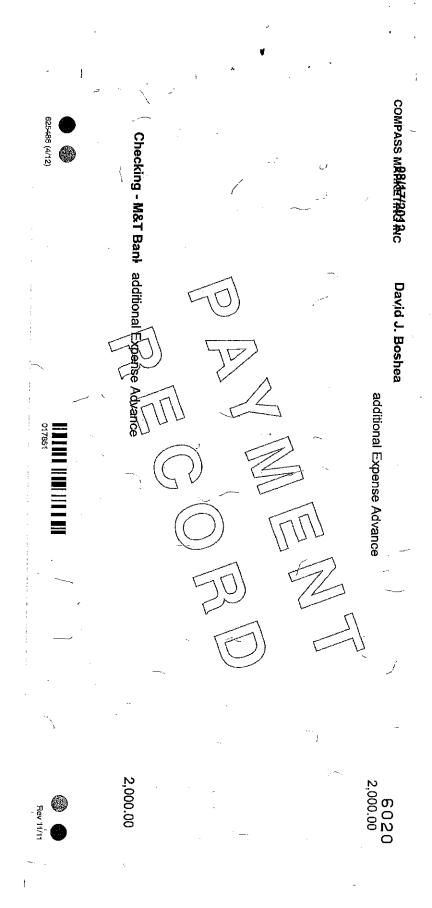
www.compassmarketinginc.com

- Colony Do

Salary Reduction Letter Boshea Sept15.docx 61K



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Springfield, IL 62794

Phone: (800) 244-5631 TTY: (800) 244-5631

Fax: (217) 557-4913 www.ides.illinols.gov 4240-1572



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## օրերիտիիկիրիկիրոնկինիկուկիկուկիկունկի



COMPASS MARKETING INC 222 SEVERN AVE STE 200 ANNAPOLIS, MD 21403-2629 Date Mailed:

03/11/2021

Employer Account Number:

4504031

Claimant SSN: xxx-xx-9797

FEIN: 541885090

Reply Due Date:

03/21/2021

## Notice of Claim to Benefit Chargeable Employer



The claimant listed below has filed a claim for Unemployment Insurance. Please review the information carefully. If you wish to protest the claimant's right to benefits for any reason other than the claimant's involvement in a Labor Dispute, you must do so in writing by attaching a signed letter to this notice which includes the claimant's name and Social Security Number. Provide a detailed and complete statement of facts supporting your allegation and mail or fax the statement by 03/21/2021 to the Agency at the address listed above.

IF YOU ARE RESPONDING TO THIS NOTICE, PLEASE PLACE ADDITIONAL DOCUMENTS BEHIND ANY BAR-CODED PAGE.

If you are registered as a SIDES Employer, and you also received an E-mail notification regarding this notice, please respond using the SIDES E-Response process by logging into https://uisides.org/sew-s/views/login.

If you would like to begin receiving or responding to Notices of Claims electronically, you may register with SIDES at https://mytax.illinois.gov. Once you have registered with SIDES E-Response you will start to receive E-mail notifications that you have requests pending. Only at this time will your SIDES account be activated and you can begin responding to Notice of Claims electronically. If at the time you receive this notice you are not registered for SIDES, you cannot respond electronically to this notice.

IMPORTANT INFORMATION: If you DO NOT wish to protest this claim, no response is necessary. HOWEVER: If you do respond to this notice please submit your response only once. If you respond electronically via SIDES then please DO NOT fax or mail your protest or response as well.

Last Name: BOSHEA	Suffix:	Other Last Name:
First Name: DAVID	Middle Initial: J	Benefit Year Begin Date: 03/08/2021
	Claim Type: Transitional	Program: Regular
First Day Worked: 06/05/2007	Last Day Worked: 03/03/2020	Reason for Separation: Laid-Off (Lack of Work)
Return to Work Date: Unknown		State Worked In: IL Dependent:None

The wages shown represent earnings the claimant received from you during the base period. A worker's base period consists of the first four of the last five completed calendar quarters immediately preceding the month in which the benefit year begins. The alternate base period is the last four completed calendar quarters immediately preceding the benefit year.

Benefit Year Begin Date: 03/08/2021

Base Period Qtr. 4 Base Period Ofr: 1

Base Period Otr: 2 Base Period Otr: 3

J30F

Base Period Year: 2019

Base Period Year: 2020 Base Period Year: 2020 Base Period Year: 2020

Total Base Period Wages: \$84,037,38

Wages: \$48,600,27 Wages: \$35,437,11 Wages: \$0.00 Wages: \$0.00



CM 0009

CM 0009

#### Document 113-15 Filed 07/31/22 Page 23 of 231 Case 1:21-cy-00309-ELH

P.O. Box 19509 Springfield, IL 62794

Phone: (800) 244-5631 · TTY: (800) 244-5631

Fax: (217) 557-4913 www.ides.illinois.gov



1072393132

COMPASS MARKETING INC. 222 SEVERN AVE STE 200 ANNAPOLIS, MD 21403-2629 Date Mailed: 03/06/2020

Employer Account Number: 4504031

Claimant SSN: 382-66-9797

FEIN: 541885090

Reply Due Date: 03/16/2020

## Notice of Claim to Benefit Chargeable Employer

The claimant listed below has filed a claim for Unemployment Insurance. Please review the information carefully. If you wish to protest the claimant's right to benefits for any reason other than the claimant's involvement in a Labor Dispute, you must do so in writing by attaching a signed letter to this notice which includes the claimant's name and Social Security Number. Provide a detailed and complete statement of facts supporting your allegation and mail or fax the statement by 03/16/2020 to the Agency at the address listed above.

IF YOU ARE RESPONDING TO THIS NOTICE, PLEASE PLACE ADDITIONAL DOCUMENTS BEHIND ANY BAR-CODED PAGE.

If you are registered as a SIDES Employer, and you also received an E-mail notification regarding this notice, please respond using the SIDES E-Response process by logging into https://uisides.org/sew-s/views/login.

If you would like to begin receiving or responding to Notices of Claims electronically, you may register with SIDES at https://mytax.illinois.gov. Once you have registered with SIDES E-Response you will start to receive E-mail notifications that you have requests pending. Only at this time will your SIDES account be activated and you can begin responding to Notice of Claims electronically. If at the time you receive this notice you are not registered for SIDES, you cannot respond electronically to this notice.

IMPORTANT INFORMATION: If you DO NOT wish to protest this claim, no response is necessary. HOWEVER: If you do respond to this notice please submit your response only once. If you respond electronically via SIDES then please DO NOT fax or mail your protest or response as well.

Last Name: BOSHEA	Suffix:	Other Last Name:
First Name: DAVID	Middle Initial: J	Benefit Year Begin Date: 03/08/2020
Date of Claim: 03/08/2020	Claim Type: New	Program: Regular
First Day Worked: 06/05/2007	Last Day Worked: 03/03/2020	Reason for Separation: Laid-Off (Lack of Work)
Return to Work Date: Unknown		State Worked In: IL Dependent:None

The wages shown represent earnings the claimant received from you during the base period. A worker's base period consists of the first four of the last five completed calendar quarters immediately preceding the month in which the benefit year begins. The alternate base period is the last four completed calendar quarters immediately preceding the benefit year.

Benefit Year Begin Date: 03/08/2020

Base Period Qtr. 4 Base Period Qtr: 1 Base Period Qtr: 2 Base Period Qtr: 3

Base Period Year: 2018 Base Period Year: 2019 Base Period Year: 2019

Base Period Year: 2019

Total Base Period Wages: \$170,865.60 Wages: \$43,416.40 Wages: \$43,766.40

Wages: \$42,016.40 Wages: \$41,666.40

CM 0010

CM 0010

Download: Export Print

Employee Name: DAVID J BOSHEA JR, Paycheck Date: 1/3/2017

Paycycle Begin Date: 12/16/2016 Paycycle End Date: 12/31/2016

Gross: \$350.00

Hours: 0 Taxes: \$4.17

Deductions: \$230.41

Net Pay: \$115.42

Earnings			Other Deductions			Employee Tax	tes	
Earnings Type	Hours	Amount	Deduction Type	Amount		Тах Туре	Taxable Earnings	Amount
R-Regular	0	\$350.00	401K		\$35.00	MED	\$54.59	\$0.79
KM-401k Match	0	\$14.00	401KL2		\$150.00	SS	\$54.59	\$3.38
	.0	\$350.00	AFLPRE		\$113.41	FITW	\$19.59	\$0.00
			D4		\$32.00	IL.	\$19.59	\$0.00
			HSA		\$150.00			\$4.17
			AUTO		(\$250.00)			
					\$230.41			
Direct Deposits					Employer T	axes		
Transit	Account			Amount	Тах Туре	er.	Taxable Earnings	
071000505	Ends with *	**3868		\$115.42	MED-R			\$54.59
				\$115.42	SS-R			\$54.59
					FUTA			\$52.63
					ILAST			\$54.59

Compass MARKETING

Mike White <mwhite@compassmarketinginc.com>

#### Re:

1 message

David Boshea <dboshea@compassmarketinginc.com> To: Mike White <mwhite@compassmarketinginc.com>

Thu, Jan 12, 2017 at 4:17 PM

Hey buddy

Hope all is well with you . Just a reminder :-) . Thanks man!

Sent from my iPhone

On Jan 2, 2017, at 1:39 PM, Mike White <mwhite@compassmarketinginc.com> wrote:

Hey Buddy,

i took a look. The small check was coded as a regular payroll check instead of an expense reimbursement. I will get it fixed on next one. The big check has SS deduction in it since a new year started.

Happy new year buddy

Mike

Michael R. White Compass Marketing Inc Annapolis Maryland 21403 410-268-0030 x 202 fax 443-782-2523

On Sat, Dec 31, 2016 at 1:11 PM, David Boshea <a href="mailto:dboshea@compassmarketinginc.com">dboshea@compassmarketinginc.com</a> wrote:

Happy New Year Buddy!

When you get a minute can you please check with our payroll company it appears they messed my checks up that hit today .....

Normal check / today check:

\$5221.05 / \$4,794.05

\$344.92 / \$115.42

Thanks Mike!

Dave

Sent from my iPhone

Message Center Case 1:21-cv-00309-ELH Attachments	Document 113-15 Interest Rate	Filed 07/31/22	Page 26 of 231 Page 3 of 3
® PriLoans170112.csv	<u> </u>		5.25%
	Comment		Paid Off
	and a second transport of the second		:

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Message Center Case 1:21-cv-00309-ELH Document 113-15 Filed 07/31/22 Page 27 of 231 Page 1 of 1

To: mwhite@compassmarketinginc.com Received: 11/30/2018, 05:11 PM CT

Product: 619054

Expires: 04/04/2019, 12:00 AM CT

Subject: Salary Deferral Percent Changes Received

Our system recognizes the following salary deferral percent change(s). Please adjust your payroll records accordingly. To help you process this information, you can download it to your computer by clicking on the attachment link at the bottom of this message.

To help ensure salary deferral percentages are implemented according to participant expectations and retirement plan provisions, please remember to report new employee and rehired employee information to us immediately so your reports include the most up-to-date information.

DAVID J BOSHEA JR Contrib Type: Elective Deferral

ID#/Alternate ID: 382669797 Pay Type: Regular Event: Standard Change Percent: 10.00

DAVID J BOSHEA JR Contrib Type: Roth Elective Deferral

ID#/Alternate ID: 382669797 Pay Type: Regular
Event: Zero Percent: 0.00

#### Please adjust your payroll records accordingly.

Contact your representative at The Principal with any questions regarding this report.

Attachments ® deferral.csv

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CM 0014 CM 0014

## verizon<sup>/</sup>

Have questions? Get the answers you need. Sign in at vzw.com

Item	Details	Qty	Price	Subtotal
IPHN 8 GRAY 64GB VZ SKU: MQ722LL/A IMEI: 354894093249975 ICCID: 89148000004004992452 Refail price: \$699.99	Mobile no.: 443-758-5504 User name: Dave Boshea Contract term: 0 month(s) Early Term. Fee: up to \$350	1	\$699.99	\$699.99
BLU BOSE SL AE2 BLK SKU: 741158-0010		1	\$229.99	\$229.99
1 YR. MFG. WARRANTY SKU: WAR6002		1	\$0.00	\$0.00
NEXT DAY BY 8PM SKU: SHP001		1	\$0.00	\$0.00
		Order St	ıbtotal	\$929.98
		MD State Sale	s Tax	\$55.80
			Total	\$985.78

Rest easy with our 14-day return policy. Visit vzw.com/returnpolicy for details. \$35 restocking fee may apply excl. Hawaii.

**Explanation of charges:** The monthly Federal Universal Service Charge is 17.90% of interstate and int'l telecom charges (varies quarterly). The monthly Regulatory Charge is \$0.21 per line for voice capable devices, or \$0.02 per line for data only devices. The monthly Administrative Charge is \$1.23 per line for voice capable devices, or \$0.06 per line for data only devices. These charges are our charges, not taxes. Taxes, surcharges and other fees, such as E911 and gross receipt charges, can add between 16.00% and 44.00% to your monthly bill, and are added to your monthly access fees and airtime charges.

## Case 1:21-cv-00309-ELH Document 113-15 Filed 07/31/22 Page 29 of 231

**To:** mwhite@compassmarketinginc.com **Received:** 05/31/2018, 07:01 PM CT

**Product:** 619054

Expires: 10/03/2018, 12:00 AM CT

Subject: Salary Deferral Percent Changes Received

Our system recognizes the following salary deferral percent change(s). Please adjust your payroll records accordingly. To help you process this information, you can download it to your computer by clicking on the attachment link at the bottom of this message.

To help ensure salary deferral percentages are implemented according to participant expectations and retirement plan provisions, please remember to report new employee and rehired employee information to us immediately so your reports include the most up-to-date information.

ERIN E SONGER Contrib Type: Roth Elective Deferral

ID#/Alternate ID: 371027545 Pay Type: Regular Event: Standard Change Percent: 7.00

ERIN E SONGER Contrib Type: Elective Deferral

ID#/Alternate ID: 371027545 Pay Type: Regular Event: Zero Percent: 0.00

DAVID J BOSHEA JR Contrib Type: Elective Deferral

ID#/Alternate ID: 382669797 Pay Type: Regular Event: Standard Change Percent: 5.00

DAVID J BOSHEA JR Contrib Type: Roth Elective Deferral

ID#/Alternate ID: 382669797 Pay Type: Regular Event: Zero Percent: 0.00

#### Please adjust your payroll records accordingly.

Contact your representative at The Principal with any questions regarding this report.

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CM 0016 CM 0016

Message Center Case 1:21-cv-00309-ELH Document 113-15 Filed 07/31/22 Page 30 of 231

**To:** mwhite@compassmarketinginc.com **Received:** 02/28/2018, 05:15 PM CT

**Product: 619054** 

Expires: 07/03/2018, 12:00 AM CT

Subject: Salary Deferral Percent Changes Received

Our system recognizes the following salary deferral percent change(s). Please adjust your payroll records accordingly. To help you process this information, you can download it to your computer by clicking on the attachment link at the bottom of this message.

To help ensure salary deferral percentages are implemented according to participant expectations and retirement plan provisions, please remember to report new employee and rehired employee information to us immediately so your reports include the most up-to-date information.

DAVID J BOSHEA JR Contrib Type: Elective Deferral

ID#/Alternate ID: 382669797 Pay Type: Regular Event: Standard Change Percent: 10.00

DAVID J BOSHEA JR Contrib Type: Roth Elective Deferral

ID#/Alternate ID: 382669797 Pay Type: Regular Event: Zero Percent: 0.00

MARIA F MAZARIEGOS Contrib Type: Elective Deferral

ID#/Alternate ID: 739777440 Pay Type: Regular Event: Enrollment Percent: 5.00

Plan Entry Date: 01/01/2018

### Please adjust your payroll records accordingly.

Contact your representative at The Principal with any questions regarding this report.

Attachments

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Message Center
Case 1:21-cv-00309-ELH Document 113-15 Filed 07/31/22 Page 31 of 231

**To:** mwhite@compassmarketinginc.com **Received:** 09/14/2017, 07:21 PM CT

Product: 619054

Expires: 01/17/2018, 12:00 AM CT

Subject: Salary Deferral Percent Changes Received

Our system recognizes the following salary deferral percent change(s). Please adjust your payroll records accordingly. To help you process this information, you can download it to your computer by clicking on the attachment link at the bottom of this message.

To help ensure salary deferral percentages are implemented according to participant expectations and retirement plan provisions, please remember to report new employee and rehired employee information to us immediately so your reports include the most up-to-date information.

DAVID J BOSHEA JR Contrib Type: Elective Deferral

ID#/Alternate ID: 382669797 Pay Type: Regular Event: Standard Change Percent: 4.00

DAVID J BOSHEA JR Contrib Type: Roth Elective Deferral

ID#/Alternate ID: 382669797 Pay Type: Regular
Event: Zero Percent: 0.00

#### Please adjust your payroll records accordingly.

Contact your representative at The Principal with any questions regarding this report.

Attachments ® deferral.csv

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Message Center Case 1:21-cv-00309-ELH Document 113-15 Filed 07/31/22 Page 32 of 231 Page 1 of 1

**To:** mwhite@compassmarketinginc.com **Received:** 05/14/2017, 05:12 PM CT

**Product:** 619054

Expires: 09/16/2017, 12:00 AM CT

Subject: Salary Deferral Percent Changes Received

Our system recognizes the following salary deferral percent change(s). Please adjust your payroll records accordingly. To help you process this information, you can download it to your computer by clicking on the attachment link at the bottom of this message.

To help ensure salary deferral percentages are implemented according to participant expectations and retirement plan provisions, please remember to report new employee and rehired employee information to us immediately so your reports include the most up-to-date information.

JOEL D BELL Contrib Type: Elective Deferral

ID#/Alternate ID: 209507609 Pay Type: Regular Event: Enrollment Percent: 5.00

Plan Entry Date: 10/16/2013

DAVID J BOSHEA JR Contrib Type: Roth Elective Deferral

ID#/Alternate ID: 382669797 Pay Type: Regular Event: Zero Percent: 0.00

DAVID J BOSHEA JR Contrib Type: Elective Deferral

ID#/Alternate ID: 382669797 Pay Type: Regular Event: Zero Percent: 0.00

#### Please adjust your payroll records accordingly.

Contact your representative at The Principal with any questions regarding this report.

Attachments

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CM 0019

Message Center
Case 1:21-cv-00309-ELH Document 113-15 Filed 07/31/22 Page 33 of 231 Page 1 of 2

**To:** mwhite@compassmarketinginc.com **Received:** 01/26/2017, 04:31 AM CT

**Product:** 619054

Expires: 05/31/2017, 12:00 AM CT

Subject: Review and/or Update Loan Records Change Report

COMPASS MARKETING INC Contract Number: 6-19054

The following loan withdrawal(s), change(s) and/or defaults(s) occurred during the reporting period. Please adjust your payroll accordingly. To help you process this information, you can download it to your computer by clicking on the attachment link at the bottom of this message.

Please adjust your payroll records accordingly.

Participant Name	
	DAVID J BOSHEA JR
Participant ID	382669797
Loan ID	0004
Location	0000001
Remaining Payback Am	\$23,853.94
Payment Amount	\$270.00
Final Payment Amount	\$93.94
Payment Frequency	S
Remaining Number of Payments	89
Interest Rate	5.25%
Comment	Change of Terms

Attachments

Pril.oans170126.csv

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## **LOAN APPLICATION & AGREEMENT**

PERSONAL & CONFIDENTIAL MIKE WHITE TRUSTEE COMPASS MARKETING INC 39650 HIAWATHA CIRCLE MECHANICSVILLE, MD 20659-2358

Part 1: LOAN APPLICATION

DAVID BOSHEA JR 4839 CLEARWATER LN NAPERVILLE, IL 60564-5397

Contract No./Plan ID No.: 6-19054

Loan ID Number: 5

I hereby apply for a Loan from the Account held for my benefit in the:

COMPASS MARKETING INC 401(K) PROFIT SHARING PLAN (hereinafter referred to as the Plan) in the amount of \$11,809.00. The Loan will be repaid by me over 86 payments of \$150.00 with a final payment of \$137.64 by regular payroll deduction. A one time \$50.00 set up fee and a \$12.00 quarterly maintenance fee will be deducted from the account the Plan holds for my benefit.

#### Part 2: LOAN AGREEMENT

A. Promissory Note

Promise to Pay: I promise to pay to the order of the Trustee(s) of the Plan the principal sum of \$11,809.00 plus interest on the unpaid balance at the rate of 5.500% per year until the Loan is

repaid in full.

Payment Schedule: I promise to repay the retirement funds loaned to me according to the payment schedule shown above. I may make a full

prepayment at any time.

Default:

I understand and agree that if any amount payable with respect to my Loan remains unpaid for more than 90 days after such amount is due, the Loan shall become immediately due and payable. In the event of a default, the Plan shall have the right to pursue any remedy available by law to satisfy the amount due, including the right to execute upon its security interest in the vested account. However, the Plan shall not levy against any portion of the vested account until a

distribution from that account could otherwise be made under

the Plan. Maintenance fees will apply until the loan is repaid in full or the Plan executes upon its security interest

in the vested account held for my benefit, if earlier.

CM 0021 CM 0021

Interest Rate	
Commen	
Participant Name	DAVID J BOSHEA JR
Participant ID	382669797
Loan ID	0003
Location	000001
Remaining Payback Amt	\$.00
Payment Amount	\$.00
Final Payment Amount	
Payment Frequency	S
Remaining Number of Payments	35
Interest Rate	5.25%
Comment	e-Check

CM 0022 CM 0022

Participant Name	DAVID J BOSHEA JR
Participant ID	382669797
Loan ID	0005
Location	0000001
Check Amount	\$11,809.00
Total Amount of	
Payment Amount	\$150.00
Estimated First	07/01/2016
Final Payment Amount	\$137.64
Final Payment Date	02/01/2020
Payment Frequency	S
Total Payback Amount	\$13,037.64
Number of Payments	

CM 0023 CM 0023

Interest Rate	
Interest to Maturity	<sup>'</sup> \$1,228.64
Commen	
	DAVID J BOSHEA JR
Participant ID	382669797
Loan ID	0004
Location	000001
Remaining Payback Amt	\$27,058.92
Payment Amount	\$270.00
Final Payment Amount	
Payment Frequency	S
Remaining Number of Payments	101
Interest Rate	5.25%
Comment	

CM 0024 CM 0024

Terms	

# Attachment(s) @ PriLoans160623.csv

#### Security Information:

To ensure confidentiality of your information, either <u>Logout</u> of Message Center or close the browser.

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CM 0025 CM 0025

Principal

Logout

help

Inbox (19)

Name: MICHAEL WHITE

E-Mail Address: mwhite@compassmarketinginc.com

Sent **Items** 

Message 9 of 60

Printable Version Delete Forward

Deleted **Items** 

Product: 619054

**Transferred Items** 

Subject: Salary Deferral Percent Changes Received

Received: 04/30/2016, 05:13 PM

Auto Forwarded **Items** 

Refresh

Forward

Auto

Our system recognizes the following salary deferral percent change(s). Please adjust your payroll records accordingly. To help you process this information, you can download it to your computer by clicking on the attachment link at the bottom of this message.

Preferences

Update E-mail Address To help ensure salary deferral percentages are implemented according to participant expectations and retirement plan provisions, please remember to report new employee and rehired employee information to us immediately so your reports include the most up-to-date information.

Your Account(s)

NEIL C COOPER ID#/Alternate ID: 380644653

Pay Type: Regular Event: Enrollment Percent: 5.00

Plan Entry Date: 07/01/2014

NEIL C COOPER

Contrib Type: Roth Elective Deferral ID#/Alternate ID: 380644653 Pay Type: Regular Event: Standard Change Percent: 2.00

DAVID J BOSHEA JR

ID#/Alternate ID: 382669797

Event: Standard Change

DAVID J BOSHEA JR

ID#/Alternate ID: 382669797 Event: Zero

Contrib Type: Elective Deferral

Contrib Type: Elective Deferral

Pay Type: Regular Percent: 10.00

Contrib Type: Roth Elective Deferral

Pay Type: Regular Percent: 0.00

Please adjust your payroll records accordingly.

Contact your representative at The Principal with any questions regarding this report.

CM 0026

Attachment(s)	
deferral.csv     deferral.csv	

Printable Version Delete Forward

<< Previous Next>>

#### **Security Information:**

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help

Inbox Message for: MICHAEL WHITE

(mwhite@compassmarketinginc.com)

**Product:** 619054

Subject: Salary Deferral Percent Changes Received

Received: 04/14/2016

Our system recognizes the following salary deferral percent change(s). Please adjust your payroll records accordingly. To help you process this information, you can download it to your computer by clicking on the attachment link at the bottom of this message.

To help ensure salary deferral percentages are implemented according to participant expectations and retirement plan provisions, please remember to report new employee and rehired employee information to us immediately so your reports include the most up-to-date information.

DAVID J BOSHEA JR

ID#/Alternate ID: 382669797

Event: Standard Change

DAVID J BOSHEA JR

ID#/Alternate ID: 382669797

Event: Zero

Contrib Type: Elective Deferral

Pay Type: Regular Percent: 9.00

Contrib Type: Roth Elective Deferral

Pay Type: Regular Percent: 0.00

Please adjust your payroll records accordingly. Contact your representative at The Principal with any questions regarding this report.

### Attachment(s)

deferral.csv

### Security Information:

To ensure confidentiality of your information, either <u>Logout</u> of Message Center or close the browser.

Help

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CM 0028

# Inbox Message for: MICHAEL WHITE

(mwhite@compassmarketinginc.com)

**Product:** 619054

Subject: Salary Deferral Percent Changes Received

Received: 03/31/2016

Our system recognizes the following salary deferral percent change(s). Please adjust your payroll records accordingly. To help you process this information, you can download it to your computer by clicking on the attachment link at the bottom of this message.

To help ensure salary deferral percentages are implemented according to participant expectations and retirement plan provisions, please remember to report new employee and rehired employee information to us immediately so your reports include the most up-to-date information.

COLIN J FITZGERALD Contrib Type: Elective Deferral

ID#/Alternate ID: 144867558 Pay Type: Regular Event: Enrollment Percent: 5.00

Plan Entry Date: 03/07/2016

NICHOLI BARCZAK Contrib Type: Roth Elective Deferral

ID#/Alternate ID: 218292161 Pay Type: Regular Event: Standard Change Percent: 5.00

NICHOLI BARCZAK Contrib Type: Elective Deferral

ID#/Alternate ID: 218292161 Pay Type: Regular Event: Standard Change Percent: 5.00

DAVID J BOSHEA JR Contrib Type: Elective Deferral

ID#/Alternate ID: 382669797 Pay Type: Regular Event: Standard Change Percent: 8.00

DAVID J BOSHEA JR Contrib Type: Roth Elective Deferral

ID#/Alternate ID: 382669797 Pay Type: Regular Percent: 0.00

Please adjust your payroll records accordingly.

Contact your representative at The Principal with any questions regarding this report.

Attachment(s)

help

Inbox Message for: MICHAEL WHITE

(mwhite@compassmarketinginc.com)

**Product:** 619054

Subject: Salary Deferral Percent Changes Received

Received: 02/29/2016

Our system recognizes the following salary deferral percent change(s). Please adjust your payroll records accordingly. To help you process this information, you can download it to your computer by clicking on the attachment link at the bottom of this message.

To help ensure salary deferral percentages are implemented according to participant expectations and retirement plan provisions, please remember to report new employee and rehired employee information to us immediately so your reports include the most up-to-date information.

NICHOLI BARCZAK

ID#/Alternate ID: 218292161

Event: Enrollment

Plan Entry Date: 09/19/2011

Contrib Type: Roth Elective Deferral

Pay Type: Regular

Percent: 10.00

NICHOLI BARCZAK

ID#/Alternate ID: 218292161

Event: Enrollment

Plan Entry Date: 09/19/2011

Contrib Type: Elective Deferral

Pay Type: Regular Percent: 10.00

DAVID J BOSHEA JR

ID#/Alternate ID: 382669797

Event: Standard Change

Contrib Type: Elective Deferral

Pay Type: Regular Percent: 7.00

DAVID J BOSHEA JR

ID#/Alternate ID: 382669797

Event: Zero

Contrib Type: Roth Elective Deferral

Pay Type: Regular Percent: 0.00

#### Please adjust your payroll records accordingly.

Contact your representative at The Principal with any questions regarding this report.

#### Attachment(s)

deferral.csv

CM 0030 CM 0030

#### **LOAN APPLICATION & AGREEMENT**

PERSONAL & CONFIDENTIAL MIKE WHITE TRUSTEE COMPASS MARKETING INC 39650 HIAWATHA CIRCLE MECHANICSVILLE, MD 20659-2358

#### Part 1: LOAN APPLICATION

DAVID BOSHEA JR 4839 CLEARWATER LN NAPERVILLE, IL 60564-5397

Contract No./Plan ID No.: 6-19054

Loan ID Number: 4

I hereby apply for a Loan from the Account held for my benefit in the:

COMPASS MARKETING INC 401(K) PROFIT SHARING PLAN (hereinafter referred to as the Plan) in the amount of \$28,000.00. The Loan will be repaid by me over 117 payments of \$270.00 with a final payment of \$201.08 by regular payroll deduction. A one time \$50.00 set up fee and a \$12.00 quarterly maintenance fee will be deducted from the account the Plan holds for my benefit.

#### Part 2: LOAN AGREEMENT

A. Promissory Note

Promise to Pay: I promise to pay to the order of the Trustee(s) of the Plan the principal sum of \$28,000.00 plus interest on the unpaid balance at the rate of 5.250% per year until the Loan is

repaid in full.

**Payment** Schedule: I promise to repay the retirement funds loaned to me according to the payment schedule shown above. I may make a full

prepayment at any time.

Default:

I understand and agree that if any amount payable with respect to my Loan remains unpaid for more than 90 days after such amount is due, the Loan shall become immediately due and payable. In the event of a default, the Plan shall have the right to pursue any remedy available by law to satisfy the amount due, including the right to execute upon its security interest in the vested account. However, the Plan shall not levy against any portion of the vested account until a

distribution from that account could otherwise be made under

the Plan. Maintenance fees will apply until the loan is repaid in full or the Plan executes upon its security interest

in the vested account held for my benefit, if earlier,

CM 0031 CM 0031

help

Inbox Message for: MICHAEL WHITE

(mwhite@compassmarketinginc.com)

**Product:** 619054

Subject: Salary Deferral Percent Changes Received

Received: 08/31/2015

Our system recognizes the following salary deferral percent change(s). Please adjust your payroll records accordingly. To help you process this information, you can download it to your computer by clicking on the attachment link at the bottom of this message.

To help ensure salary deferral percentages are implemented according to participant expectations and retirement plan provisions, please remember to report new employee and rehired employee information to us immediately so your reports include the most up-to-date information.

DAVID J BOSHEA JR

ID#/Alternate ID: 382669797 Event: Standard Change

DAVID J BOSHEA JR

ID#/Alternate ID: 382669797

Event: Zero

Contrib Type: Elective Deferral

Pay Type: Regular Percent: 12.00

Contrib Type: Roth Elective Deferral

Pay Type: Regular Percent: 0.00

Please adjust your payroll records accordingly.

Contact your representative at The Principal with any questions regarding this report.

### Attachment(s)

deferral.csv

#### Security Information:

To ensure confidentiality of your information, either <u>Logout</u> of Message Center or close the browser.

Help

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CM 0032 CM 0032

Principal\_

Logout

Inbox (11)

Name: MICHAEL WHITE

E-Mail Address: mwhite@compassmarketinginc.com

Sent **Items** 

Message 2 of 81

Deleted <u>Items</u>

Items

Printable Version Delete Forward

Transferred

Product: 619054

Subject: Salary Deferral Percent Changes Received

Received: Friday, 08/14/2015, 05:23 PM

Auto Forwarded **Items** 

Refresh

Auto

Our system recognizes the following salary deferral percent change(s). Please adjust your payroll records accordingly. To help you process this information, you can download it to your computer by clicking on the attachment link at the bottom of this message.

Forward Preferences

Update E-mail Address To help ensure salary deferral percentages are implemented according to participant expectations and retirement plan provisions, please remember to report new employee and rehired employee information to us immediately so your reports include the most up-to-date information.

Your Account(s)

SAMUEL R PACIELLO Contrib Type: Elective Deferral ID#/Alternate ID: 106661731

Pay Type: Regular Event: Standard Change Percent: 5.00

DAVID J BOSHEA JR ID#/Alternate ID: 382669797 Contrib Type: Elective Deferral

0.00

Pay Type: Regular Percent: Event: Standard Change 8.00

DAVID J BOSHEA JR

Contrib Type: Roth Elective Deferral ID#/Alternate ID: 382669797 Pay Type: Regular

Event: Zero Percent:

Please adjust your payroll records accordingly.

Contact your representative at The Principal with any questions regarding this report.

Attachment(s)

deferral.csv

Printable Version Delete Forward

CM 0033

CM 0033



help

Inbox Message for: MICHAEL WHITE

(mwhite@compassmarketinginc.com)

**Product:** 619054

Subject: Informational Deferral Notification

Received: 01/31/2015

The following salary deferral percent change(s) have been elected for the reporting period. This information has been reported to your payroll vendor and is for your reference only.

MARK R WARREN

ID#/Alternate ID: 023562260

Event: Standard Change

MARK R WARREN

ID#/Alternate ID: 023562260

Event: Zero

DAVID J BOSHEA JR

ID#/Alternate ID: 382669797

Event: Standard Change

DAVID J BOSHEA JR

ID#/Alternate ID: 382669797

Event: Zero

Contrib Type: Elective Deferral

Pay Type: Regular

Percent: 4.00

Contrib Type: Roth Elective Deferral

Pay Type: Regular

Percent: 0.00

Contrib Type: Elective Deferral

Pay Type: Regular Percent: 5.00

Contrib Type: Roth Elective Deferral

Pay Type: Regular Percent: 0.00

#### Attachment(s)

deferral.csv

## Security Information:

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CM 0034 CM 0034



Inbox Message for: MICHAEL WHITE

(mwhite@compassmarketinginc.com)

**Product:** 619054

Subject: Informational Deferral Notification

Received: 11/14/2014

The following salary deferral percent change(s) have been elected for the reporting period. This information has been reported to your payroll vendor and is for your reference only.

ALEXANDER J MCCORD

ID#/Alternate ID: 213315807

Event: Standard Change

ALEXANDER J MCCORD

ID#/Alternate ID: 213315807

Event: Standard Change

JUSTIN P LUI

ID#/Alternate ID: 215334176

Event: Enrollment

Plan Entry Date: 09/01/2014

JUSTIN P LUI

ID#/Alternate ID: 215334176

Event: Standard Change

DAVID J BOSHEA JR

ID#/Alternate ID: 382669797

Event: Standard Change

DAVID J BOSHEA JR

ID#/Alternate ID: 382669797

Event: Zero

Contrib Type: Roth Elective Deferral

Pay Type: Regular

Percent: 2.00

Contrib Type: Elective Deferral

Pay Type: Regular

Percent: 10.00

Contrib Type: Roth Elective Deferral

Pay Type: Regular

Percent: 5.00

Contrib Type: Elective Deferral

Pay Type: Regular

Percent: 5.00

Contrib Type: Elective Deferral

Pay Type: Regular

Percent: 4.00

Contrib Type: Roth Elective Deferral

Pay Type: Regular

Percent: 0.00

#### Attachment(s)

deferral.csv

Security Information:

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CM 0035

Help

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help

Inbox Message for: MICHAEL WHITE

(mwhite@compassmarketinginc.com)

**Product:** 619054

Subject: Informational Deferral Notification

Received: 11/14/2014

The following salary deferral percent change(s) have been elected for the reporting period. This information has been reported to your payroll vendor and is for your reference only.

ALEXANDER J MCCORD

ID#/Alternate ID: 213315807

Event: Standard Change

ALEXANDER J MCCORD

ID#/Alternate ID: 213315807 Event: Standard Change

JUSTIN P LUI

ID#/Alternate ID: 215334176

Event: Enrollment

Plan Entry Date: 09/01/2014

JUSTIN P LUI

ID#/Alternate ID: 215334176 Event: Standard Change

DAVID J BOSHEA JR

ID#/Alternate ID: 382669797

Event: Standard Change

DAVID J BOSHEA JR

ID#/Alternate ID: 382669797

Event: Zero

Contrib Type: Roth Elective Deferral

Pay Type: Regular Percent: 2.00

Contrib Type: Elective Deferral

Pay Type: Regular Percent: 10.00

Contrib Type: Roth Elective Deferral

Pay Type: Regular Percent: 5.00

Contrib Type: Elective Deferral

Pay Type: Regular Percent: 5.00

Contrib Type: Elective Deferral

Pay Type: Regular Percent: 4.00

Contrib Type: Roth Elective Deferral

Pay Type: Regular Percent: 0.00

#### Attachment(s)

deferral.csv

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CM 0037 CM 0037

| <u>Help</u>

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CM 0038 CM 0038

# Compass Marketing Commissions 9/12-8/13



- Amazon.com -
- K-Mart -
- Melody Int.-
- · Offshore -
- Walmart -
- Sam's Club -

Total -

\$20,000

\$ 8,782

\$64,367

\$75,113

\$555,749

\$785,382

\$1,509,443

E K WAS

PROCECTFON

PROCECTFO

All commissions paid on unit rate paid on /unit rate

CM

- Not renewing "Term" of Walmart Consulting Agreement effective December 1, 2013
- Maintain all other agreements including Sam's Club, K-Mart, Melody, Offshore
- Structure Amazon to a global scale
- Continue to build mutual businesses



# **Compass Marketing**

- Bjoern Leyser VP Global Consumer Connected Sales and Development - reporting to Jerry Wolfe
  - Responsible for global strategies on digital path to purchase
  - Amazon global responsibities
  - Flavor Print evolution
  - Marketing Resources
- Rick Morse VP Global Customers reporting to Ken Stickevers
  - Responsible for Walmart/Sam's Costco, BJ's, e-commerce
  - Ron Puggi and e-commerce now joins this team
  - Compass working relationship with Ron on e-commerce

Inbox Message for: MICHAEL WHITE

(mwhite@compassmarketinginc.com)

**Product:** 619054

Subject: Informational Loan Report

**Received:** 06/12/2014

COMPASS MARKETING INC Contract Number: 6-19054

The following loan withdrawal(s), change(s) and/or defaults(s) occurred during the reporting period. This information has been reported to your payroll vendor and is for your reference only.

Participant Name	DAVID J BOSHEA JR
Participant ID	382669797
Loan ID	0002
Location	000001
Remaining Payback Amt	\$4,044.16
Payment Amount	\$75.00
Final Payment Amount	\$69.16
Payment Frequency	S
Remaining Number of Payments	54
Interest Rate	5.25%
Comment	Change of Terms
<b>19</b>	
Participant Name	DAVID J BOSHEA JR
Participant ID	382669797
Loan ID	0003
Location	0000001
Remaining Payback Amt	\$12,368.31
Payment Amount	\$150.00
Final Payment Amount	\$68.31
Payment Frequency	S
Remaining Number of Payments	83
Interest Rate	5.25%
Comment	Change of Terms

CM 0043 CM 0043

#### Attachment(s)

PriLoans140612.csv

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CM 0044 CM 0044



Inbox Message for: MICHAEL WHITE

(mwhite@compassmarketinginc.com)

**Product:** 619054

Subject: Informational Deferral Notification

Received: 05/14/2014

The following salary deferral percent change(s) have been elected for the reporting period. This information has been reported to your payroll vendor and is for your reference only.

DEBRA J WHITE Contrib Type: Elective Deferral

ID#/Alternate ID: 212820983 Pay Type: Regular Event: Enrollment Percent: 5.00

Plan Entry Date: 03/16/2012

OWEN K MCGREEVEY Contrib Type: Elective Deferral

ID#/Alternate ID: 261158131 Pay Type: Regular Event: Enrollment Percent: 6.00 Plan Entry Date: 06/15/2011

DAVID J BOSHEA JR Contrib Type: Roth Elective Deferral

ID#/Alternate ID: 382669797 Pay Type: Regular Event: Zero Percent: 0.00

DAVID J BOSHEA JR Contrib Type: Elective Deferral

ID#/Alternate ID: 382669797 Pay Type: Regular Event: Zero Percent: 0.00

#### Attachment(s)

deferral.csv

#### **Security Information:**

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CM 0045 CM 0045



Mike White <mwhite@compassmarketinging.com>

### Re: 401k

message

**Dave Boshea** <dboshea@compassmarketinginc.com>
To: Mike White <mwhite@compassmarketinginc.com>

Thu, May 29, 2014 at 6:55 PM

thx brother . Yes just for few months college bills :-) Thank God they are cute most of the time :-) thx for checking in !!! On flight back from few days with Barry at acct calls in CA ugggg . All good. We need to PLAY GOLF soon !!!! thx bro

On Thu, May 29, 2014 at 5:47 PM, Mike White <a href="mailto:compassmarketinginc.com">mwhite@compassmarketinginc.com</a> wrote: Hey Brother,

I received a notice that you stopped your 401k participation. Did you mean to do that ??? No worries just making sure.

Mike
Michael R. White
Compass Marketing Inc
Annapolis Maryland 21403
410-268-0030 x 202
fax 443-782-2523

David J. Boshea Group Vice President Compass Marketing Inc. 4839 Clearwater Ln. Naperville, IL 60564

Cell: 443-758-5504 Fax: 443-458-0192

email: dboshea@compassmarketinginc.com

www.compassmarketinginc.com

CM 0046 CM 0046



**Product:** 619054

Subject: Action Needed! Salary Deferral Notification

Received: 09/14/2013

Our system recognizes the following salary deferral percent change (s). Please adjust your payroll records accordingly. To help you process this information, you can download it to your computer by clicking on the attachment link at the bottom of this message.

To help ensure salary deferral percentages are implemented according to participant expectations and retirement plan provisions, please remember to report new employee and rehired employee information to us immediately so your reports include the most up-to-date information.

DAVID J BOSHEA JR Contrib Type: Elective Deferral

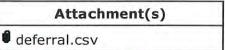
ID#/Alternate ID: 382669797 Pay Type: Regular Event: Standard Change Percent: 14.00

DAVID J BOSHEA JR Contrib Type: Roth Elective Deferral

ID#/Alternate ID: 382669797 Pay Type: Regular Event: Zero Percent: 0.00

Please adjust your payroll records accordingly.

Contact your representative at The Principal with any questions regarding this report.



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CM 0047 CM 0047

#### **LOAN APPLICATION & AGREEMENT**

PERSONAL & CONFIDENTIAL MIKE WHITE TRUSTEE COMPASS MARKETING INC 39650 HIAWATHA CIRCLE MECHANICSVILLE, MD 20659-2358

Part 1: LOAN APPLICATION

DAVID BOSHEA JR 4839 CLEARWATER LN NAPERVILLE, IL 60564-5397

Contract No./Plan ID No.: 6-19054

Loan ID Number: 3

I hereby apply for a Loan from the Account held for my benefit in the:

COMPASS MARKETING INC 401(K) PROFIT SHARING PLAN (hereinafter referred to as the Plan) in the amount of \$14,000.00. The Loan will be repaid by me over 104 payments of \$150.00 with a final payment of \$76.53 by regular payroll deduction. A one time \$50.00 set up fee and a \$12.00 quarterly maintenance fee will be deducted from the account the Plan holds for my benefit.

#### Part 2: LOAN AGREEMENT

A. Promissory Note

Promise to Pay: I promise to pay to the order of the Trustee(s) of the Plan the principal sum of \$14,000.00 plus interest on the unpaid balance at the rate of 5.250% per year until the Loan is

repaid in full.

Payment Schedule: I promise to repay the retirement funds loaned to me according to the payment schedule shown above. I may make a full

prepayment at any time.

Default:

I understand and agree that if any amount payable with respect to my Loan remains unpaid for more than 90 days after such amount is due, the Loan shall become immediately due and payable. In the event of a default, the Plan shall have the right to pursue any remedy available by law to satisfy the amount due, including the right to execute upon its security interest in the vested account. However, the Plan shall not levy against any portion of the vested account until a

distribution from that account could otherwise be made under

the Plan. Maintenance fees will apply until the loan is repaid in full or the Plan executes upon its security interest

in the vested account held for my benefit, if earlier.

CM 0048 CM 0048



help

Inbox Message for: MIKE WHITE

(MWHITE@COMPASSMARKETINGINC.COM)

**Product:** 619054

Subject: Action needed - Loan report

Received: 08/15/2013

COMPASS MARKETING INC Contract Number: 6-19054

The following loan withdrawal(s), change(s) and/or defaults(s) occurred during the reporting period. Please adjust your payroll accordingly. To help you process this information, you can download it to your computer by clicking on the attachment link at the bottom of this message.

Please note that the first pay period end date is an estimated date. To ensure the loan is paid off prior to the maximum duration date payroll deduction should be set up as soon as possible.

Please adjust your payroll records accordingly.

* * * * * * * * * * * * * * * * * * *	
Participant Name	DAVID J BOSHEA JR
Participant ID	382669797
Loan ID	0003
Location	0000001
Check Amount	\$14,000.00
Total Amount of Loan	
Payment Amount	\$150.00
Estimated First Payment Date	08/15/2013
Final Payment Amount	\$76.53
Final Payment Date	

CM 0049 CM 0049

P	ĺ
	12/15/2017
Payment Frequency	S
Total Payback Amount	\$15,676.53
Number of Payments	105
Interest Rate	5.25%
Interest to Maturity	\$1,676.53
Comment	New Loan

# Attachment(s) PriLoans130815.csv

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Help

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CM 0050 CM 0050



(MWHITE@COMPASSI

(MWHITE@COMPASSMARKETINGINC.COM)

**Product:** 619054

Subject: Action needed - Loan report

Received: 08/08/2013

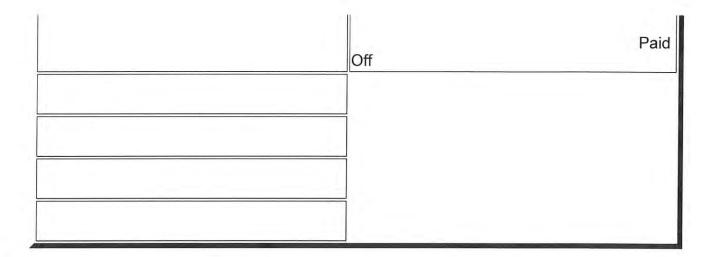
# COMPASS MARKETING INC Contract Number: 6-19054

The following loan withdrawal(s), change(s) and/or defaults(s) occurred during the reporting period. Please adjust your payroll accordingly. To help you process this information, you can download it to your computer by clicking on the attachment link at the bottom of this message.

Please adjust your payroll records accordingly.

Participant Name	DAVID J BOSHEA JR
Participant ID	382669797
Loan ID	0001
Location	0000001
Remaining Payback Amt	\$.00
Payment Amount	\$.00
Final Payment Amount	\$126.63
Payment Frequency	S
Remaining Number of Payments	1
Interest Rate	4.25%
Comment	

CM 0051 CM 0051



# Attachment(s) PriLoans130808.csv

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> CM 0052 CM 0052

DAVID BOSHEA 03-04
JULIE L. BOSHEA 1-CV-00309-ELH Document 113-15 Filed 07/31/2000 Page 66 of 231
4839 CLEARWATER IN.
NAPERVILLE, IL 60564

Pay

Composs Marketing, INC \$507.

Bank of America

ACH RIT DB1904808

Memo Pay Of & 401K Loan 1

1:0710005051: 0053057038584 3073

CM 0053 CM 0053

# Compass' MARKETING

# **Principal \$126.41**

**Dave Boshea** <dboshea@compassmarketinginc.com>
To: Mike White <mwhite@compassmarketinginc.com>

Fri, Jul 26, 2013 at 12:32 PM

Hey brother, I just talked to these guys and they told me you have to resubmit the change to pay off loan 1 balance of \$126.41 . For some reason the \$507 payoff check was spilt incorrectly . Thx buddy

David Boshea Group Vice President Compass Marketing, Inc 443-758-5504

Sent from my iPhone



**Product:** 619054

Subject: Action needed - Loan report

**Received:** 07/25/2013

# COMPASS MARKETING INC Contract Number: 6-19054

The following loan withdrawal(s), change(s) and/or defaults(s) occurred during the reporting period. Please adjust your payroll accordingly. To help you process this information, you can download it to your computer by clicking on the attachment link at the bottom of this message.

Please adjust your payroll records accordingly.

Participant Name	DAVID J BOSHEA JR
Participant ID	382669797
Loan ID	0001
Location	0000001
Remaining Payback Amt	\$126.63
Payment Amount	\$126.41
Final Payment Amount	\$126.63
Payment Frequency	S
Remaining Number of Payments	1
Interest Rate	4.25%
Comment	

CM 0055 CM 0055

	Change of Terms
Participant Name	DAVID J BOSHEA JR
Participant ID	382669797
Loan ID	0002
Location	0000001
Remaining Payback Amt	\$5,703.70
Payment Amount	
Final Payment Amount	
Payment Frequency	S
Remaining Number of Payments	76
Interest Rate	5.25%
Comment	Change of Terms

# Attachment(s)

PriLoans130725.csv

#### **Security Information:**

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CM 0057 CM 0057

# Compass MARKETING

# Re: Exp

**Dave Boshea** <a href="mailto:smaller">dboshea@compassmarketinginc.com></a>
To: Mike White <a href="mailto:smaller">mwhite@compassmarketinginc.com></a>

Wed, Jul 24, 2013 at 10:21 AM

Thx brother.

I just checked that 401k loan and it shows \$126 balance still . I will call them to see what's up . Keep cool ! Thx

David Boshea Group Vice President Compass Marketing, Inc 443-758-5504

Sent from my iPhone

On Jul 22, 2013, at 5:58 PM, Mike White <a href="mailto:mwhite@compassmarketinginc.com">mwhite@compassmarketinginc.com</a> wrote:

will do
Michael R. White
Compass Marketing Inc
Annapolis Maryland 21403
410-268-0030 x 202
fax 443-782-2523

On Mon, Jul 22, 2013 at 8:51 AM, Dave Boshea <a href="mailto:compassmarketinginc.com">doshea@compassmarketinginc.com</a> wrote: Hey Brother
Hope your keeping cool... It's been brutal. Can you pls try and shoot me some of those exp checks .... I have \$5k payment I have to make 7/25/13. Thx buddy

David Boshea Group Vice President Compass Marketing, Inc 443-758-5504

Sent from my iPhone

CM 0058 CM 0058

help

Inbox Message for: MIKE WHITE

(MWHITE@COMPASSMARKETINGINC.COM)

**Product:** 619054

Subject: Action Needed! Salary Deferral Notification

Received: 07/14/2013

Our system recognizes the following salary deferral percent change(s). Please adjust your payroll records accordingly. To help you process this information, you can download it to your computer by clicking on the attachment link at the bottom of this message.

To help ensure salary deferral percentages are implemented according to participant expectations and retirement plan provisions, please remember to report new employee and rehired employee information to us immediately so your reports include the most up-to-date information.

DAVID J BOSHEA JR Contrib Type: Elective Deferral

ID#/Alternate ID: 382669797 Pay Type: Regular Event: Standard Change Percent: 11.00

DAVID J BOSHEA JR Contrib Type: Roth Elective Deferral

ID#/Alternate ID: 382669797 Pay Type: Regular
Event: Zero Percent: 0.00

JOHN W ADAMS Contrib Type: Elective Deferral

ID#/Alternate ID: 551063770 Pay Type: Regular Event: Standard Change Percent: 7.00

JOHN W ADAMS Contrib Type: Roth Elective Deferral

ID#/Alternate ID: 551063770 Pay Type: Regular Event: Zero Percent: 0.00

Please adjust your payroll records accordingly.

Contact your representative at The Principal with any questions regarding this report.

## Attachment(s)

deferral.csv

#### **Security Information:**

To ensure confidentiality of your information, either <u>Logout</u> of Message Center or close the browser.



Close

help

Inbox Message for: MIKE WHITE

(MWHITE@COMPASSMARKETINGINC.COM)

**Product:** 619054

Subject: Action Needed! Salary Deferral Notification

Received: 05/14/2013

Our system recognizes the following salary deferral percent change(s). Please adjust your payroll records accordingly. To help you process this information, you can download it to your computer by clicking on the attachment link at the bottom of this message.

To help ensure salary deferral percentages are implemented according to participant expectations and retirement plan provisions, please remember to report new employee and rehired employee information to us immediately so your reports include the most up-to-date information.

BARBARA A ZORN

Contrib Type: Elective Deferral

ID#/Alternate ID: 172525083 Event: Enrollment

Pay Type: Regular Percent: 6.00

Plan Entry Date: 05/01/2013

DAVID J BOSHEA JR

Contrib Type: Elective Deferral

ID#/Alternate ID: 382669797 Event: Standard Change

Pay Type: Regular Percent: 9.00

DAVID J BOSHEA JR

Contrib Type: Roth Elective Deferral

ID#/Alternate ID: 382669797

Pay Type: Regular

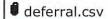
Event: Zero

Percent: 0.00

Please adjust your payroll records accordingly.

Contact your representative at The Principal with any questions regarding this report.

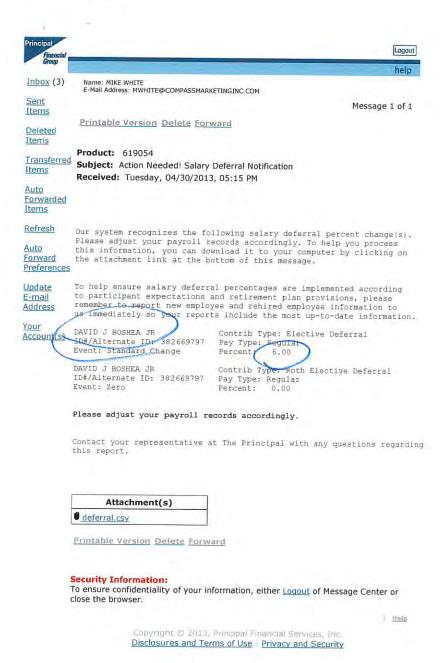
#### Attachment(s)



#### **Security Information:**

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| Help



CM 0061

CM 0061

#### Case 1:21-cv-00309-ELH Document 113-15 Filed 07/31/22 Page 75 of 231

ID No.	SSN	Payroll Site	Deferral Date	Event	Contrib Type	Pay Type	Percent	Dollar	Plan Entry	/ Date
	382669797	•	5012013	_	1	l	1 0.06		0	
	382669797		5012013	3 Z	21	1	1 (	כ	0	

#### **LOAN APPLICATION & AGREEMENT**

PERSONAL & CONFIDENTIAL MIKE WHITE TRUSTEE COMPASS MARKETING INC 39650 HIAWATHA CIRCLE MECHANICSVILLE, MD 20659-2358

Part 1: LOAN APPLICATION

DAVID BOSHEA JR 4839 CLEARWATER LN NAPERVILLE, IL 60564-5397

Contract No./Plan ID No.: 6-19054

Loan ID Number: 2

I hereby apply for a Loan from the Account held for my benefit in the:

COMPASS MARKETING INC 401(K) PROFIT SHARING PLAN (hereinafter referred to as the Plan) in the amount of \$6,000.00. The Loan will be repaid by me over 87 payments of \$75.00 with a final payment of \$77.80 by regular payroll deduction. A one time \$50.00 set up fee and a \$12.00 quarterly maintenance fee will be deducted from the account the Plan holds for my benefit.

#### Part 2: LOAN AGREEMENT

A. Promissory Note

Promise to Pay: I promise to pay to the order of the Trustee(s) of the Plan the principal sum of \$6,000.00 plus interest on the unpaid balance at the rate of 5.250% per year until the Loan is

repaid in full.

**Payment** Schedule: I promise to repay the retirement funds loaned to me according

to the payment schedule shown above. I may make a full

prepayment at any time.

Default:

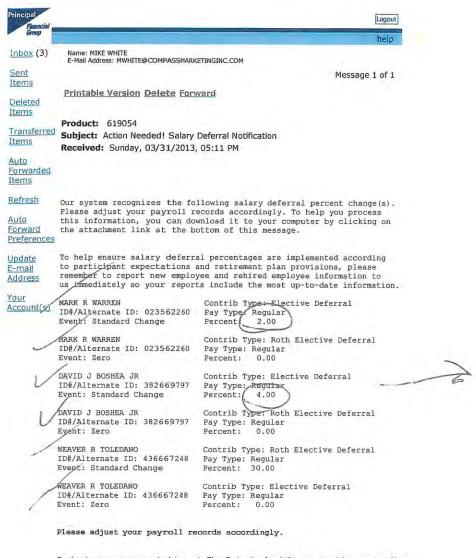
I understand and agree that if any amount payable with respect to my Loan remains unpaid for more than 90 days after such amount is due, the Loan shall become immediately due and payable. In the event of a default, the Plan shall have the right to pursue any remedy available by law to satisfy the amount due, including the right to execute upon its security interest in the vested account. However, the Plan shall not levy against any portion of the vested account until a

distribution from that account could otherwise be made under

the Plan. Maintenance fees will apply until the loan is repaid in full or the Plan executes upon its security interest

in the vested account held for my benefit, if earlier.

CM 0063 CM 0063



Contact your representative at The Principal with any questions regarding this report.



Printable Version Delete Forward

#### Security Information:

To ensure confidentiality of your information, either  $\underline{\text{Logout}}$  of Message Center or close the browser.

| Help

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CM 0064 CM 0064

Principal Financial Group

Close

help

Inbox Message for: MIKE WHITE

(MWHITE@COMPASSMARKETINGINC.COM)

**Product:** 619054

Subject: Action needed - Loan report

**Received:** 03/28/2013

MMD 3-39-2013

COMPASS MARKETING INC Contract Number: 6-19054

The following loan withdrawal(s), change(s) and/or defaults(s) occurred during the reporting period. Please adjust your payroll accordingly. To help you process this information, you can download it to your computer by clicking on the attachment link at the bottom of this message.

Please note that the first pay period end date is an estimated date. To ensure the loan is paid off prior to the maximum duration date payroll deduction should be set up as soon as possible.

Please adjust your payroll records accordingly.

Participant Name	DAVID J BOSHEA JR
Participant ID	382669797
Loan ID	0002
Location	000001
Check Amount	\$6,000.00
Total Amount of Loan	
Payment Amount	\$75.00
Estimated First Payment Date	04/01/2013
Final Payment Amount	\$77.80
Final Payment Date	

CM 0065 CM 0065

	11/15/2016
Payment Frequency	
Total Payback Amount	\$6,602.80
Number of Payments	
Interest Rate	5.25%
Interest to Maturity	\$602.80
Comment	

#### Attachment(s)

PriLoans130328.csv

#### **Security Information:**

To ensure confidentiality of your information, either <u>Logout</u> of Message Center or close the browser.

Help

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CM 0066 CM 0066

## Case 1:21-cv-00MANGLACT DREASTMENT 11.20LERS FIRESTOCOMEANYPage 80 of 231 REQUEST FOR FUNDS TRANSFER PAYMENT ORDER

06308

Charlotte Hall

Payment Date:

02/05/13

#### RECURRING TEMPLATE PAYMENT ORDER:

Template Name: Amount of Payment: Additional Information:

#### ONE TIME PAYMENT ORDER (NO TEMPLATE INVOLVED)

Amount of Payment:

\$5000.00

M&T Account to Charge:

000000000970081243

Currency: Cost Center: US 6308

Additional Information:

Account to Credit:

005306703868

From/By Order Of:

COMPASS MARKETING INC

To/For Account Title:

DAVID BOSHEA

ABA Number:

540330104

Ref:

024009593

Test Key:

#### SOURCE OF FUNDS.

Business Name or Customer Name:

\*COMPASS MARKETING INC

Authorized Rep(s) of Business:

Michael White

Address:

39650 HIAWATHA CIR

MECHANICSVILLE, MD 206592358

Telephone No.:

#### NAME OF BENEFICIARY BANK.

To Bank:

BANK OF AMERICA

Bank Address: (if known)

**AUTHORIZATION:** 

Customer Authorization:

Print Name of Business or Customer Name

Signature of Authorized Rep or Customer Name Title (if applicable)

Customer Authorization:

Print Name of Business or Customer Name

Signature of Authorized Rep or Customer Name Title (if applicable)

Identification:

DL

04/14 W300603745298 MD

Identification:

Customer agrees to the terms & conditions on the In-Person Funds Transfer Agreement provided.

2UF

#### Case 1:21-cv-00309-ELH Document 113-15 Filed 07/31/22 Page 81 of 231

# MANUFACTURERS AND TRADERS TRUST COMPANY IN-PERSON FUNDS TRANSFER AGREEMENT

To induce Bank to execute the funds transfer payment order on page one of this Agreement, Customer makes the following waivers and agrees to the following terms and conditions.

- 1. Waiver of Bank's Security Procedures. Customer hereby rejects and waives the protection of the Bank's customary funds transfer security procedures, and agrees that a request for personal identification in a procedure including signature comparison shall be deemed a commercially reasonable security procedure for purposes of Article 4A of the Uniform Commercial Code.
- 2. Anthorization. Customer shall supply Bank with all information that Bank requests including, but not limited to, money amounts; beneficiary's account number, name and bank; value (or payment) date; supplemental instructions; and further evidence of the authority of any of Customer's authorized representatives to issue Payment Orders or to do any its due authorization. If Customer is an entity, the person signing this Agreement certifies that he or she is duly authorized to execute such transaction on behalf of Customer; and under federal and state law.
- 3. Account Number Controls. CUSTOMER ACKNOWLEDGES RECEIPT OF NOTICE THAT M&T BANK, ALL INTERMEDIARY BANKS AND BENEFICIARY'S BANK ARE ENTITLED TO RELY ON THE BENEFICIARY'S ACCOUNT NUMBER AND ANY BANK IDENTIFYING NUMBER AS STATED IN THE PAYMENT ORDER AS RECEIVED EVEN IF THE NUMBER AND NAME GIVEN FOR THE BENEFICIARY REFER TO DIFFERENT PERSONS OR BANKS. CUSTOMER IS WARNED TO VERIFY ALL ACCOUNT NUMBERS AND BANK NUMBERS WITH EXTRAORDINARY CARE.
- 4. Risk of Clear Test. Customer understands that all Payment Orders are transmitted in Clear Text and Customer assumes full responsibility for all such Payment Orders executed by Bank at Customer's request.
- Standard of Care. Customer agrees Bank has no responsibility beyond executing the transaction requested with ordinary care, subject to this Agreement. Bank shall be conclusively deemed to have exercised ordinary care if Bank has followed procedures customary in the industry or if Customer has not followed such procedures.
- 6. Cancellation. Customer shall have no right to amend a Payment Order or to cancel it after Bank has begun processing it. In case of Customer error, Bank has no obligation but reserves the right to attempt to assist Customer to recover its funds.
- 7. Limited to Available Funds. A Payment Order is debited to Customer's designated account when it is executed by Bank. Customer agrees that its Payment Orders shall not exceed the available balance in Customer's account on the execution date. If Customer's account does not contain sufficient available funds on that date, Bank may reject any or all of Customer's Payment Orders for that date, charge any of Customer's other accounts with Bank, or execute any one or more Payment Orders on that date; and Bank shall not be liable for any damages (including without limitation special or consequential damages) Customer suffers as a result of such rejections. If Bank does in its discretion execute a Payment Order which results in an overdraft in Customer's account, Bank shall be entitled to charge and Customer shall be obligated to pay interest on such overdraft. Customer's account will be liable for statutory overdraft charges whether or not the overdraft Payment Order is executed.
- 8. Expenses. Customer agrees to pay Bank's customary funds transfer fees as in effect from time to time and to reimburse Bank for any out-of-pocket expenses incurred by Bank. Such fees and expenses shall be paid in cash immediately on demand or by Bank's debiting Customer's account(s) at Bank.
- 9. Notice of Errors. Customer shall promptly review the transfer confirmation or advice mailed to Customer by Bank after each transfer and notify Bank of any discrepancy in provided by Bank and report any discrepancies to Bank in writing within 60 calendar days of the transfer. Customer shall also promptly review and reconcile its periodic statements of account such discrepancies shall relieve Bank of any liability for interest on any refund to which Customer may be entitled with respect to such unreported discrepancies. Statements and advices shall be deemed received 5 days after mailing.
- 10. <u>Disclosure of Information.</u> Customer acknowledges that Bank may be or become required by federal regulation to report or make information available concerning all or some classes of funds transfers.
- 11. Force Maleure. Customer agrees that Bank is not liable for any error, interruption, delay, or failure in transmission occasioned by any circumstances beyond Bank's control including but not limited to discrepancies or ambiguity in any Payment Order, funds transfer system unavailability, weather, failure of power, other utilities or communication media, strikes, industrial sabotage, war, governmental interference, and error, delay, insolvency or unavailability of other receiving, intermediary or beneficiary banks.
- 12. Indemnity. Customer agrees to hold Bank harmless and indemnify Bank for any and all claims, liabilities, demands, costs, expenses (including but not limited to attorneys' fees and disbursements), losses or damages of any nature whatsoever arising directly or indirectly from any Payment Order executed pursuant to this Agreement except for liability to Customer caused by gross negligence or willful misconduct of Bank. In no event shall Bank be liable for any consequential or special damages.
- 13. Governing Law. This Agreement shall be governed by the internal laws of New York State (without reference to its principles of conflict of laws) and by applicable federal law and regulations.

All notices to Bank shall be directed to the Manager, Payment Services, 3rd Floor, Manufacturers and Traders Trust Company, One M&T Plaza, Buffalo, New York 14203-2399; all notices to Customer shall be directed to Customer at the most recent address listed in the records of Bank.

PA018A (05/08)

CM 0068 CM 0068

# ு, பave bosnea <dboshea@compassmarketinginc.com> wrote:

> It's bank of america Route 540330104 acct 005306703868

> David Boshea

> Group Vice President

> Compass Marketing, Inc

> 443-758-5504

> Sent from my iPhone

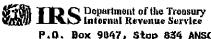
270081243 > On Feb 1, 2013, at 9:22 AM, John White <jwhite@compassmarketinginc.com> wrote:

>> Dave.

>> Please send your bank contact info and we will contact them to see what's what.

443.782-2523

Case 1:21-cv-00309-ELH Document 113-15 Filed 07/31/22 Page 83 of 231



P.O. Box 9047, Stop 834 ANSC Andover MA 01810-0947

DAVID J BOSHEA JR 4839 CLEARWATER LN NAPERILLE IL 60564-5397

Here is IRS letter moving my allowances bas to 8.

Thanks, Dane

Mike,

Case 1:21-cv-00309-ELH Document 113-15 Filed 07/31/22 Page 84 of 231

IRS Department of the Treasury

P.O. Box 9047, Stop 834 ANSC Andover MA 01810-0947

In reply refer to: 0866467420 Jan. 10, 2013 LTR 2812C 0 382-66-9797 000000 00

> 00074592 BODC: WI

DAVID J BOSHEA JR 4839 CLEARWATER LN NAPERILLE IL 60564-5397

Social Security Number: 382-66-9797

Dear David J Boshea Jr:

WHY ARE WE WRITING TO YOU?

We reviewed the additional information you gave us. Based on this information, we are modifying the withholding rate (marital status) and/or withholding allowances in our previous letter(s). We will instruct your employer(s) to withhold income tax based on the following withholding rate and allowances:

Employer: Compass Marketing Inc Withholding Rate (Marital Status): Married Withholding Allowances: 08

You do not need to take any further action.

CAN YOU CHANGE THIS DETERMINATION?

If at any time your personal or financial situation changes (for example, marriage, birth of child, or major change in wages), you may need to request a change of this determination.

PLEASE CALL the number shown below and explain why you are entitled to a different withholding rate and/or number of withholding allowances (or exempt status). When you call, have the following information available. If you file jointly, you must have the same information available for your spouse.

- Form W-4, Employee s Withholding Allowance Certificate, and worksheets (You must complete the "Two Earners/Multiple Jobs Worksheet" on the back of the Form W-4, if you have more than one job or your spouse works).
- 2. Most current pay stubs for all jobs.
- The social security number and date of birth for any additional dependents you are entitled to claim.
- A copy of the current tax return due, including all schedules, forms and attachments.

If you prefer you may write to us at the address shown below. Please send a written statement requesting a redetermination and the information above to support your claim that you are entitled to a

Case 1:21-cv-00309-ELH Document 113-15 Filed 07/31/22 Page 85 of 231

0866467420 Jan. 10, 2013 LTR 2812C 0 382-66-9797 000000 00 00074593

DAVID J BOSHEA JR 4839 CLEARWATER LN NAPERILLE IL 60564-5397

different withholding rate (marital status) and/or number of withholding allowances (or exempt status).

You can give your employer(s) a Form W-4 which results in MORE income tax withholding than at the withholding rate and withholding allowances shown above and your employer(s) must honor it.

WHERE CAN YOU FIND ADDITIONAL INFORMATION?

Additional information is available on our website at www.irs.gov, keyword: withholding compliance.

HOW DO YOU CONTACT THE WITHHOLDING COMPLIANCE UNIT?

You may call the Withholding Compliance Unit, weekdays between the hours of 8:00 a.m. and 8:00 p.m. at 1-866-791-0289.

You may send us the information by fax. Our fax number is 855-202-8300. Please include a cover sheet giving the following information:

Date:

·Name:

Phone number and hours we can reach you:

Social Security Number:

Number of faxed pages:

You may write to us at the address shown below:

Internal Revenue Service Compliance Services Withholding Compliance Program P.O. Box 9047, Stop 837 Andover, MA 01810-0947

Whenever you write, please include a copy of this letter and, in the spaces below, give us your telephone number with the hours we can reach you. Keep a copy of this letter for your records.

		,		Harris and American		.*
Telephone	Number	(	•	Hour	r <b>5</b>	

CM 0072 CM 0072

P.004/004

Case 1:21-cv-00309-ELH Document 113-15 Filed 07/31/22 Page 86 of 231

0866467420 Jan. 10, 2013 LTR 2812C 0 382-66-9797 000000 00 00074594

DAVID J BOSHEA JR \_ 4839 CLEARWATER LN NAPERILLE IL 60564-5397

Sincerely yours,

M. P. Conway

Operations Manager, Collection

Enclosures: Envelope Form W-4

CM 0073 CM 0073



PO Box 9047 Stop 837 Andover MA 01810-0947

In reply refer to: 0866000000 Oct. 04, 2012 LTR 2800C W2 382-66-9797 000000 00

> 00020390 BODC: NOBOD

COMPASS MARKETING INC 39650 HIAWATHA CIR MECHANICSVLLE MD 20659

011955

Employer Identification Number: 54-1885090 Employee: DAVID J BOSHEA Social Security Number: 382-66-9797 Form W-4

Dear COMPASS MARKETING INC

WHY ARE WE WRITING TO YOU?

We have reason to believe that your employee above may have filed an incorrect Form W-4, Employee's Withholding Allowance Certificate.

WHAT YOU NEED TO DO?

You will need to begin withholding income tax from this employee s wages based on the following withholding rates; effective on the first pay period after Dec. 03, 2012 Withholding Rate (Marital Status): single Withholding Allowances: 0000

DO NOT ADJUST WITHHOLDING PRIOR TO THE DATE SHOWN ABOVE

This time period will provide your employee with an opportunity to dispute our determination before you adjust the withholding.

However, don't honor any new Form W-4 from this employee UNLESS it results In MORE income tax withheld than the withholding rate and allowances shown above.

If the employee is working for you as of the date of this letter, you must provide the employee the enclosed "Employee's Copy" WITHIN 10 BUSINESS DAYS OF RECEIPT. (This 10-day timeframe refers to the employee s copy only. Please see the above effective date to start withholding the new withholding rate for the employee.) You may follow any reasonable business practice to furnish the Employee's Copy to the employee.

For Internal Use Only 382-66-9797

CM 0074 CM 0074

#### 

0866000000 Oct. 04, 2012 LTR 2800C W2 382-66-9797 000000 00

00020392

COMPASS MARKETING INC 39650 HIAWATHA CIR MECHANICSVLLE MD 20659



011955

#### WHERE CAN YOU FIND ADDITIONAL INFORMATION?

- - Visit our website at www.irs.gov and search keyword "withholding compliance."
  - Publication 15 (Circular E), Employer's Tax Guide
  - Publication 51 (Circular A), Agricultural Employer's Tax Guide.
  - For tax forms, instructions and publications, visit www.irs.gov or call 1-800-TAX-FORM (I-800-829-3676).

#### WHAT IF YOU HAVE MORE QUESTIONS?

If you have any questions, you may contact the Withholding Compliance unit by:

- Calling 1-855-839-2235 weekdays between the hours of 8:00 a.m. and 8:00 p.m.; or
- Sending a fax to 855-202-8300; or
- Writing to the address shown below

Internal Revenue Service Compliance Services Withholding Compliance Unit P.O. Box 9047, Stop 837 Andover, MA 01810-0947

Whenever you contact us, please give us your telephone number with the hours we can reach you in case we need more information.

Keep a copy of this letter for your records.

Sincerely yours,

M. P. Conway

Operations Manager, Collection

CM 0075 CM 0075

#### Case 1:21-cv-00309-ELH Document 113-15 Filed 07/31/22 Page 89 of 231

0866000000 Oct. 04, 2012 LTR 2800C W2 382-66-9797 000000 00

00020395

COMPASS MARKETING INC 39650 HTAWATHA CIR MECHANICSVLLE MD 20659



011955

- When you call, have the following information available. If you file jointly, you must have the same information available for your spouse.
  - Form W-4 and worksheets. (You must complete the "Two Earners/ Multiple Jobs Worksheet" on the back of the Form W-4, if you have more than one job or your spouse works.)
  - 2. Most current pay stubs for all jobs.
  - Number of withholding allowances you (and your spouse) are currently claiming on your Form(s) W-4.
  - 4. The social security number and date of birth for any dependent you are entitled to claim.
  - 5. A copy of the current tax return due, including all schedules, forms and attachments.
- If you prefer you may write to us at the address shown below. Please send a written statement requesting a redetermination and the information above to support your claim that you're entitled to a different withholding rate (marital status) and/or number of withholding allowances (or exempt status).
- If the information justifies a change to the withholding rate (marital status) and/or withholding allowances shown above, we'll instruct your employer to adjust your income tax withholding accordingly.

#### WHAT DOES THIS CHANGE MEAN?

This change in your withholding rate (marital status) and/or withholding allowances will mean an increase in the amount of tax withheld from your wages.

#### CAN YOU BE ASSESSED A PENALTY?

If there is no reasonable basis to justify the withholding rate (marital status), withholding allowances, or exempt status claimed on your Form W-4, you may be subject to a \$500 civil penalty under IRC section 6682 for making a false statement about your withholding.

#### Case 1:21-cv-00309-ELH Document 113-15 Filed 07/31/22 Page 90 of 231

0866000000

Oct. 04, 2012 LTR 2800C W2

382-66-9797 000000 00

00020397

COMPASS MARKETING INC 39650 HIAWATHA CIR MECHANICSVLLE MD 20659



011955

For Internal Use Only 382-66-9797

CM 0077 CM 0077

PO Box 9047 Stop 837 Andover MA 01810-0947



COMPASS MARKETING INC 39650 HIAWATHA CIR MECHANICSVLLE MD 20659

011955

CM 0078 CM 0078

Resize Window

CARRIER ID CARD REQUEST

Your request for the following card(s) has been sent to the insurance vendor(s)!

Receipt of ID card(s) varies by each insurance vendor but a general estimate would be 7 to 14 business days. Medical Card Dental Card Vision Card

#### Thank you for submitting your ID Card Replacement Request online!

OPEN TEMPORARY ID CARD

#### A THE REQUESTED REPLACEMENT CARD(S) WILL BE SENT TO THIS MEMBER'S CURRENT ADDRESS:

4839 CLEARWATER LANE NAPERVILLE, IL 60564

Please verify that this address is correct. To update this address information, browse to this member's GENERAL INFORMATION page and submit any changes.

Close Window

CM 0079 CM 0079

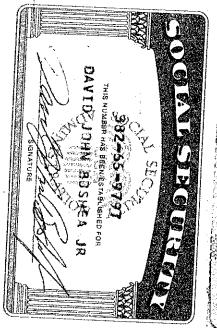
The Secretary of State of the United States of America hereby requests all whom it may concern to permit the citizen inational of the United States named berein to pass without delay or hindrance and in case of need to give all lawful aid and protection.

Le Secrétaire d'Etat des États-Unis d'Amérique prie par les présentes toutes autorités compétentes de laisser passes le citogén ou ressortissant des Etats-Unis titulaire du présent passeport, sans délai ni difficulté et, en cas de besoin, de lui accorder toute aide et protection légitlines.

El Secretario de Estado de los Estados Unidos de América por el presente solicita a las antoridades competentes permittir el paso del ciudadano o nacional de los Estados Unidos aqui nombrado, sin demora ni dificultades, y en caso de necesidad, prestarle toda la ayuda y protección lícitas.

SIGNATURE OF BEARENSIGNATURE DU TITULARE FIRMA DEL TITULAR

NOT VALID UNTIL SIGNED





#### CONTRIBUTED CHARACTER AND CONTRACTOR

Passport No: / No. du Passoport / No. de Pasaporte 310708852

Surname / Nom / Apellidos

BOSHEA JR

Giveil names / Prénoms / Nombres

DAVID JOHN

Nationality / Nationalité / Nacionalidad

UNITED STATES OF AMERICA

Date of birth/ Date de naissance/Fecha de nacimiento

02 APR 1962

Sex / Sexe / Sexo Place of birth / Lieu de naissance / Lugar de nacimiento

NEW YORK, U.S.A.

Date of issue / Date de délivrance / Fecha de expedición

13 FEB 2007

Authority / Autorite Autoridad
United States

Dela of expiration / Data of expiration / Fecha de caducidad Department of State 12 FEB 2017

Amendments / Modifications / Enimiendas SEE PAGE 24

P<USABOSHEA<JR<<DAVID<JOHN<<<<<<<<<<< 3107088524USA6204028M1702127<<<<<<<<<<<<<<<<<<<<<<<<<<

# Compass MARKETING

### H S A Salary Reduction Form January 1, 2010 - December 31, 2010

This Salary Reduction Agreement (SRA) authorizes your employer to reduce your salary to the indicated amount shown below for the exclusive purpose of facilitating a contribution to your Health Savings Account.

HEALTH SAVINGS ACCOUNT ELIGIBILITY INFORMATION: In order to establish a Health Savings Account, you must be classified as an "Eligible Individual" under IRC Section 223, applicable sub-sections and rulings, collectively called the "Code". You are eligible for an HSA ONLY if you can meet the following requirements: (1) you are covered by a high-deductible health plan (HDHP); (2) you are not covered by another health plan that is not a HDHP (including a general-purpose FSA set-up by you or your spouse); (3) you are not able to be claimed as a dependent by another taxpayer, (4) you are not entitled to benefits under Medicare.

By completing this agreement, you are indicating that as of the effective date of your contribution election, you are an "Eligible Individual" as defined above, and authorize your employer to facilitate your monthly contributions to your HSA on your behalf. Note: You may contribute the IRS maximum annual amount if enrolled in a eligible HSA-compatible health plan through the following calendar year in its entirety. You must remain in a HSA-compatible plan for this period to avoid tax penalties (January 2010 - December 2010).

Tn	ctra	ccti	ons
	эиг		uu.

Step 1:	Complete the PERSONAL INFORMATION section. All Information is requi	red
---------	---	-----

- Step 2: Complete the HSA CONTRIBUTION ELECTION section with your total monthly contribution amount.
- Step 3: Sign in the SIGNATURES section and return to your employer for processing.

PERSONAL INFORMATION

Name:	First: David	Last Bosi	bea J	5.5.# 382-66-9797 .
Home Address:		learwater		Home Phone: 630-922-4552
	City: Naperville	State: T-L	Zip: 60564	Date of Birth: 4-2-62
HSA CONTRIB	UTION ELECTION			
I ELECT A	BI-WEEKLY CONTRIBUTION OF \$	150.00	TO MY HSA EFFE	CTIVE 1-15-2010
DO NOT IN	CLUDE ANY EMPLOYER CONTRI	BUTIONS IN YOUR BI-W	EEKLY ELECTION A	MOUNT.
covered by a HD	HP can make a calendar year catch-i MSA or H.S.A. account holders with acc	up contribution of \$1,000 e	ach year until enrolling	50 for family coverage, individuals age 55 and older who are in Medicare. Thei the total annual contributions to all accounts may not exceed
SIGNATURES				
Health Savings is completed, a	Account in accordance with Section 22:	3 and Section 125 of the Inte	mal Revenue Code. I un	ible Individual" as defined by the Code and do hereby elect a derstand this request will not be processed until all paperwork ring that all contributions made to my HSA do not exceed the
Signature:	- Jang	1 Sin before	Date:	1-10-2010
Employer Sign:	ature: The employee's election of the H	ealth Saving's Account Cont	ribution is accepted as of	the date shown below.
Signature:			Date:	
<u> </u>				

Pay	chex Usa Only	
Client Account Number Worker Number PRS	Date Time Contact	PAYCHEX* Direct Deposit Signup Form
Verified By Scanning instructions are locate		
Worker Instructions: 1. Complete the *WORKE: 2. Complete the Direct Der want your pay deposited 3. Sign the bottom of the fit 4. Retain a copy of this for original to your employe  WORKER - RE PLEASE PRINT Worker Name	R - Required Information" section. posit section to specify where you t. orm. m for your records. Return the	Employer Instructions:  1. Complete the "EMPLOYER - Required Information" section.  2. Return this form to your local Paychex office."  *See below for acceptable bank documentation.  EMPLOYER Required Information  PLEASE PRINT  Company Name  OMASS MAKETTIMA  Service Location/Client Accl. Number £526  Federal ID Number
	Complete for Direct De	
······································	e my employer to deposit my wag	es/salary to the following bank account(s):
☐ Savings	Dy Spawa Bank	Bank Account #2  Checking  Bank Name  Savings
Bank Name	- W	Bank Name
	us attached application if you would ase Pay Card Plus.	Chase Pay Card Plus  Please complete the attached application if you would like to sign up for Chase Pay Card Plus.
I wish to deposit (check	one):	I wish to deposit (check one):
☐ Remainder of Net Pa	·	☐ Remainder of Net Pay
□ % of Net		□% of Net
•	unt \$00  a following for Checking or	Specific Dollar Amount \$
☐ Voided check	in ottop.	□ Voided check
☐ Deposit slip (only a	ccepted if the verbiage "ACH etherouting number)	Deposit slip (only accepted if the verbiage "ACH R/T" appears before the routing number)
	ification sheet (the signature of presentative MUST be included)	Bank letter or specification sheet (the signature of your local bank representative MUST be included)
	Employer S	ection Only
If bank documentation pro	ovided is different from what is listed	i above, the following must be completed by the employer:
1	amed employee has added or chan	ged a bank account for direct deposit transactions
Employer Signature		
	greeing that I am either the account ect deposits into the named account	Date <u>0 1 1 0 8 1 0 9</u> nolder or have the authority of the accountholder to authorize
Accountholder Signatification (if worker doesn't have as	ture uthority to authorize deposits to the	accountholder's account.)

DP0002 12/08

CM 0082 CM 0082



### HSA Salary Reduction Form January 1, 2009 - December 31, 2009

This Salary Reduction Agreement (SRA) authorizes your employer to reduce your salary to the indicated amount shown below for the exclusive purpose of facilitating a contribution to your Health Savings Account.

HEALTH SAVINGS ACCOUNT ELIGIBILITY INFORMATION: In order to establish a Health Savings Account, you must be classified as an "Eligible Individual" under IRC Section 223, applicable sub-sections and rulings, collectively called the "Code". You are eligible for an HSA ONLY if you can meet the following requirements: (1) you are covered by a high-deductible health plan (HDHP); (2) you are not covered by another health plan that is not a HDHP (including a general-purpose FSA set-up by you or your spouse); (3) you are not able to be claimed as a dependent by another taxpayer; (4) you are not entitled to benefits under Medicare.

By completing this agreement, you are indicating that as of the effective date of your contribution election, you are an "Eligible Individual" as defined above, and authorize your employer to facilitate your monthly contributions to your HSA on your behalf. Note: You are eligible to make the IRS maximum contribution for an entire year if enrolled in a eligible HSA-compatible health plan for the entire 12-month period. You must remain in a HSA-compatible plan for this entire 12-month period to avoid tax penalties (January 2009 -December 2009).

**Instructions** 

Complete the **PERSONAL INFORMATION** section. All Information is required.

Step 1:

Step 2:

Step 2:	Complete the <b>HSA CONTRIBUTION ELECTION</b> section with your to	
Step 3:	Sign in the <b>SIGNATURES</b> section and return to your employer for pro	cessing.
PERSONAL IN	FORMATION	
Name:	First: David Boshea, Jr. Joh	M: S.S.# 382-66-9797
Home Address:	Street: 4839 Clearwater LN.	Home Phone: 630 - 922 - 4552
	City: Naperville State: Zip: LL 60564	Date of Birth: 4-2-1962
HSA CONTRIE	UTION ELECTION	
	BI-WEEKLY CONTRIBUTION OF \$ TO MY HSA I CLUDE ANY EMPLOYER CONTRIBUTIONS IN YOUR BI-WEEKLY ELECTION	ON AMOUNT.
employees aged	MSA or H.S.A. account holders with accounts at other financial institutions, please reme	
SIGNATURES		
is completed, a	nature: As of the effective date of my HSA Contribution Election. I certify that I am an Account in accordance with Section 223 and Section 125 of the Internal Revenue Code ccepted and approved by my employer. I further understand that I am responsible for a allowed by the IRS.	2. Lunderstand this request, will not be processed until all paperwork
Employer Sign	ature: The employee's election of the Health Saving's Account Contribution is accepted	as of the date shown below.
Signature:	Da	ate:

CM 0083 CM 0083



# Salary Reduction Form Plan Year ~ January 1, 2009 through December 31, 2009

				TIL STATE OF THE S				
	Name: David J.	Boshea,	J <sub>c</sub> s.	s.# 382-	66-979	77		
on	Address: 4839 Clear water LN							
Your Information	city: Naperville		Sta	te: IL	Zip: 60564	/		
our In		2-455		rk Phone: 630				
	Marital Status: ☐ Single/Divorce	ced 🖾 Marrie	d Dat	te of Birth: 4 /	211962			
	Enrollment Type: 🛛 Open Enrollm	nent	lire Effe	ective Date of Cov	/erage: / / / /	7009		
	Per Pay Deductions	Employee	Emp/Child(ren)	Emp/Spouse	<u>Family</u>	Waiving		
Medical & Dental Plan	Medical CareFirst - HSA HMO	□ \$17.40	□ \$32.25	□ \$40.05	□ \$48.75	□ \$0.00		
Med	Medical CareFirst - HSA PPO	□ \$60.40	□ \$111.25	□ \$139.05	為 \$169.25	□ \$0.00		
	Dental Sun Life - PPO	□ \$5.20	□ \$16.20	□ \$22.20	\$29.20	□ \$0.00		
Authorization & Certification	I authorize Compass Marketing, Inc. to make the appropriate payroll deductions for the coverages that I elect. I understand that there can be no change permitted to the above elections during the plan year unless there is a change in my life status and I notify the Human Resources Department of this change in writing (within 30 days of the lifestatus change).  Employee Signature:  Date: 12-18-08							
Waiver	I hereby certify that I have been offered decided NOT to elect coverages offered able to enroll again until the next open Human Resources Department of this c	d above. I understan enrollment period (I change in writing (wi	d that by waiving cov November 1st) unless thin 30 days of the lif	erage now for me a I have a qualified l e status change).	ind/or my denender	ate I will not be		

CM 0084 CM 0084



United Way of Central Maryland

# uwcm.org

	Learn. Give. Help.			
1. My information Please print firmly and clearly. Your personal information is k	cept confidential.			
Female Male Birth year 19 6 2 Emp. ID (optional)				
First Name  David				
Employer.	Work Phone			
Compass marketing INC	443-758=5504			
Home Address 4839 C/earwaler LN				
4839 C/earwalter LN State Zip	Home Phone			
Naperville	64 630 922 4552			
Horne e-mail - t				
Leadership Society Challenge Match  Please match my rife coal man because a me how to include	3. Preferred payment method:			
Please match my gift, so I may become a member of United Way of Central Maryland	PLEASE CHOOSE A, B, C or D			
minimum gift of \$750) See back for details	A. Payroll deduction: \$ 10,000 per pay period			
estate plan.	for a total annual gift of \$ 240			
2. My total gift \$ 240.00 Thank you.	Per year			
indink you.	B. Charge			
My Gift to United Way of Central Maryland:	Per year. One-time \$ Monthly \$ Quarterly \$			
Where my gift will help the most people.	( ) Visa ( ) MasterCard ( ) Discover ( ) American Express			
	Credit Card #			
Invest in United Way's Impact Areas:	Expiration date/ Please charge me on/or starting/			
0,0	C Direct Debit or EFT			
	I would like to deduct \$ continuously each			
299. Basic Needs \$ 599. Family Safety \$	month by direct debit payment or electronic funds transfer .			
$\sim$ $\sim$ $\sim$ $\sim$ $\sim$ $\sim$	Account Type: Checking Savings			
talia Ro	Bank Account Number			
799, School Readiness \$ \$\frac{1}{2}\text{Vev.}  999. Youth Achieving Potential \$	Routing Number			
	Name on the Account			
Designation Option *A minimum gift of \$50 per year is required for each designation made. If your designation is less than \$50, it will revert to United Way of Central Maryland. Designations must be	To be billed monthly starting /			
received by United Way of Central Maryland no later than March 1st. Must be a charitable health and human service tax exempt organization or other United Way in the United States, See www.uwcm.org for more details.	Month Day Year			
	D. Check (Payable to United Way of Central Maryland)			
Program/Agency name and address Foundation of Depression Directory code Per year	Select here if you wish to remain anonymous. Otherwise, your name will be released to the designated program/agency.			
WWW. depression. org	4. Sign and date here to authorize pledge			
Program/Agency name and address Directory code Per year**	and payment method			
Complete only if you wish to exclude a specific United Way Partner from receiving any part of your gift.				
Partner exclusion(s)	11/10/108			

United Way of Central Maryland applies a fee of 17.5 percent on designations. The fee will not exceed \$375 for United Way partners.

Blue Copy - PAYROLL

White Copy - UNITED WAY

Form# 64786

mm/dd/yy

Here is your new Blue Cash for Business Credit Card.

Case 1:21-cv-00309-ELH Document 113-15 Filed 07/31/22 Page 99 of 231



Activate today and start enjoying the benefits of Cardmembership.

768747 000044

DAVID BOSHEA

COMPASS MARKETING

STE 200

612 3RD ST

ANNAPOLIS

MD 21403

0406H9R0000202

20070829

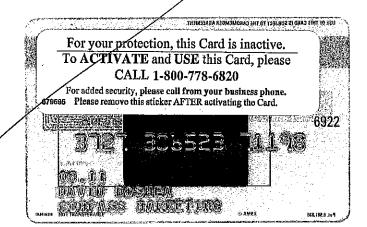
0652371198

#### Activate your Card today

Have the Primary Cardmember on the account call the number on the front of the Card to activate for you.

OR

If the Primary Cardmember is unavailable, call the number on the front of the Card to activate your Card on your own.



#### Protect yourself and your purchases when you use your Business Card:

• Travel Insurance - Includes Car Rental Loss and Damage Insurance1, Travel Accident Insurance2 and the Baggage Insurance Plan

Purchase Protection Plan4 - Protects eligible purchases made with the Card against accidental damage and

theft for up to 90 days from the date of purchase.

Buyer's Assurance Plans - Extends the terms of the original manufacturer's warranty on eligible items for up to

one additional year on warranties of five years or less that are eligible in the U.S.

 Global Assist Hotline<sup>6</sup> - Whenever you travel more than 100 miles from home, you have security and peace of mind 24/7 with medical legal, financial or other emergency assistance, including medical and legal referrals, visa/passport help, cash access, lost luggage and more.

Plus, **OPEN Savings**<sup>®</sup> is a built-in benefit of your Business Card that provides automatic savings, from 3% to 25%, on business expenses. Simply use your Card at participating companies and the savings are automatically credited to the Primary Cardmember's monthly statement. Visit **opensavings.com** to see a complete list of OPEN Savings partners.

#### **FAX COVER SHEET**



Compass Marketing 612 3<sup>rd</sup> Street, Suite 200 Annapolis, Maryland 21403 (410) 268-0030 ext 202 Efax: (443) 782-2523

mwhite@compassmarketinginc.com

Date: Friday, July 27, 2007

From: Michael White

To: Ronda Sandy Spring Bank

Fax: 301-260-0044

Number of Pages (including cover page):\_\_\_2\_\_

Comments:

Call me if you need anything else

Mike

CM 0087 CM 0087



August 7, 2007

COMPASS MARKETING 0830-P526 39650 HIAWATHA CIRCLE MECHANICSVILLE, MD 20659-2304

Confirmation Number:

7282343

Dear Paychex Retirement Services Client:

Employees selecting the enroll option for the first time have an opportunity to hear and change their date of birth in our records if it is incorrect. The following employee modified their date of birth in our records through the Paychex Retirement Services Information Line or Paychex Online Retirement Services.

Employee Name:

David J Boshea Jr

New date of birth:

04/02/1962

Please review the updated information for accuracy to ensure we have the correct date of birth in our records for this employee. Complete information is important to the accuracy of your plan's compliance results and your employee's eligibility and vesting.

If you have any questions, please contact our Client Service Center at 1-800-472-0072. Representatives are available to assist you Monday through Friday between 8:00 a.m. and 8:00 p.m. ET.

Thank you,

Paychex Retirement Services

CM 0088 CM 0088

# IlliMidwest Equity Mortgage

2015 Spring Rd. #330 Oak Brook, IL, 60523 Phone (630) 572-8200 Fax (630) 572-8222 www.midwestequity.com



To:	Mic	hael White		From:	Robert Garrison	
Fax:	443-782-2523			Pages		
Phone:	410	0-268-0030		Date	4-21	
Re:	Verification of Employment			cc:		
□ Urge	nt	☐ For Review	□ Please Co	mment	☐ Please Reply	□ Please Recycle

#### Comments:

Attached is the borrowers authorization to release information and a verification of Employment. Please fill out all of the circled numbers and fax back to me at 630-396-2672. If you have any questions please call me at 630-572-8200. Thanks

PLEASE FILL OUT COMPLETELY AND ACCURATLEY AND BREAK DOWN INCOME IF NEEDED. THANKS

CM 0089 CM 0089

Request for Verification of Employment

100405001

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Privacy Act program. It for approval (IFVA); by 12	t Notice: This inform will not be disclosed as a prospective m USC, Section 1701 e	nation is to be used be outside the agency ex- nortgagor or borrower i at seq. (if HUD/FHA); b	y the agency collecting the second collection of the collection of	ng it or its easignees permitted by law. Yo ejected. The informa 52b (if HUD/CPD); an	in determin u do not hav ation reques d'Ittle 42 US	ning whether you qualify a ve to provide this informati- ted in this form is author; C, 1471 et. seq., or 7 USC,	is a prospective mortgagor under its on, but if you do not your application zed by Title 38, USC, Chapter 37 1921 et seq. (If USDA/FmHA).
Instruction	Employer- Plea	=(= 14=113   Ullough /. ISA CAMINIAIA Alihar Da	neve applicant com	ipiele item B. Forw	ard directly t	to employer, named in iter directly to lender nam he applicant or any other	m_1,
	equest;						
	Resources/Verifier			Rob Ga		Madicaa di Iciladi)	
	s Marketing, inc	-					
	lawatha Cirole					flortgage, LLC	
	icsville, MD 20669	•			_	d Suite 330	
(P) 410-2					ook, IL 60	523	
				(P) 630	-572-8200		
(F) 443-7					-572-8222		
certify that	this verification has t	been sent directly to t	he employer and has	not passed through	the hands	of the applicant or any ot	her interested party.
3. Signatur	of larrer		4, Title			5. Date	6. Lender's No. (Optional)
A Comment of the second	A CONTRACTOR OF THE PARTY OF TH	1	Loan Processo	r		04/20/2010	or conders no. (Optional)
l have applie	d for a mortgage los	an and stated that I a	m now of was former	rly employed by you	Mk elanak	ire below authorizes verific	and the same of th
7. Name ar	nd Address of App	licant (include empl	nvee or hadge are	whose	. In a signatu		
	Boshea, SSN: 382		oyee or beage and	undi)		8. Signature of Applic	cant
4839 Cle	arwater Ln					GEE ATTACUMENT	
Napervill	l <del>e</del> , IL 60584					SEE ATTACHMENT	
	22-4552 (B) 410-20	68-0030					
Daren Livi		(eseni Eurolovi		niko karangan mangan mangan	HARACRE TATION COMMISSION		
9 Applicant	's Date of Emplo	yment 10 Prese					
			, ,	$\cap$	Ç	11.)Probability of Cor	ntinued Employment
	NUE 20	0/ (5P	oup /	$L^{\circ}$		ELO	CRRITUST
12A.)Current	t Gross Base Pay	(Enter Amount and	Check Period)	3. For Military	Personnel		ime or Bonus is Applicable,
	Annual	Hourly	ŗ	Pay Grade			Continuance Likely?
	Monthly	Other (8	Specify)		la a	<del></del>	
<b>\$</b>	Weekly		-1	Тура	Monthly A	Amount Overtime	a Yes ∐ No <b>X</b> ≧L
Ψ		<u>_</u>		\		Bonus	Yes No
		oss Earnings		Base Pa	\$ /	( <u>15</u> ⊅if paid I	hourly-average hours per week
Туре	Year To Date / &	Past Year 67	Past Year <u>⇔</u> A	Rations	\$		
	Thru			Flight or		16) Date of	applicant's next pay increase
Base Pay	\$	\$	<b>\$</b>	Hazard	s/	4	skinger a udvi bal molegae
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Overtime	18	\$	s	**************************************	<del>/"\</del>	47 \0	
		<u> </u>	<u> </u>	Cumstau /	\	(17.)Projecte	d amount of next pay increase
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***************************************	<u> </u>		<del>                                    </del>	Pro Pay	\$ \_	(18_/Date of	applicant's last pay increase
Bonus	! \$	e e		Oversiess or	J. \ \	\ <del> </del>	
DOTIGO	Ψ	5	\$	Compat	\$	19) Amount	of last pay increase
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22. Date Tem	ninated	Base		Nerime_		mmissions	Manage
24. Reason	for Leaving	The same of the sa		25 Position		ពាកាសេទប្រកុទ	Bonus
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	of Employer 1	- e-ementor by t		110 U.D.D.A.,	1010/2017	commissioner, or the	HUD/CPD Assistant Secretary.
		1	1 PATIE	le (Please print o	rtype)	) , , , (	28. Date
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- ///	ype name signed i			one No. /		7	4-23-2010
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Cályx Form - w	oe.fim (11/07)		<del></del>		<del>/</del>	J <u>V_</u>	<u></u>

### **Borrowers' Certification and Authorization**

#### CERTIFICATION

1. I/We have applied for a mortgage loan through Midwest Equity Mortgage, LLC In for the loan, I/We completed a loan application containing various information on the purple loan, the amount and source of the down payment, employment and income information, and and liabilities. I/We certify that all of the information is true and complete. I/We misrepresentations in the loan application or other documents, nor did I/We omit any information.  2. I/We understand and agree that Midwest Equity Mortgage, LLC reserves to the complete of the purple of the loan application or other documents.	ose of the the assets made no
loan, the amount and source of the down payment, employment and income information, and and liabilities. I/We certify that all of the information is true and complete. I/We misrepresentations in the loan application or other documents, nor did I/We omit any information.	the assets made no
and liabilities. I/We certify that all of the information is true and complete. I/We misrepresentations in the loan application or other documents, nor did I/We omit any information.	made no
misrepresentations in the loan application or other documents, nor did I/We omit any information.	
information.	pertinent
2. I/We understand and agree that Midwest Equity Mortgage, LLCreserves t	
	the right to
change the mortgage loan review processes to a full documentation program. This may include	e verifying
the information provided on the application with the employer and/or the financial institution.	
3. I/We fully understand that it is a Federal crime punishable by fine or imprisonment, or	r both, to
knowingly make any false statements when applying for this mortgage, as applicable	
provisions of Title 18, United States Code, Section 1014.	
AUTHORIZATION TO RELEASE INFORMATION	
ACTIONISM IN TO REPROPER AND	
To Whom It May Concern:	
1. I/We have applied for a mortgage loan through Midwest Equity Mortgage, LLC	P
the application process, Midwest Equity Mortgage, LLC and the mortgage guara	•
(if any), may verify information contained in my/our loan application and in other documents r	-
connection with the loan, either before the loan is closed or as part of its quality control program	
2. I/We authorize you to provide to Midwest Equity Mortgage, LLC and to any in	
whom Midwest Equity Mortgage, LLC may sell my mortgage, any and all inform	
documentation that they request. Such information includes, but is not limited to, employmentation	_
and income; bank, money market and similar account balances; credit history; and copies of i	income tax
returns.	
3. Midwest Equity Mortgage, LLC or any investor that purchases the mortgage many	ay address
this authorization to any party named in the loan application.	
<ol> <li>A copy of this authorization may be accepted as an original.</li> </ol>	
Borrower Signature Co-Borrower Signature	
David J Boshea	
SSN: 382-66-9797 Date: 41(14) SSN: Date;	

#### FAX COVER SHEET



Compass Marketing
222 Severn Ave Building 14 Suite 200
Annapolis, Maryland 21403
(410) 268-0030 ext 202
Efax: (443) 782-2523
mwhite@compassmarketinginc.com

Date: Friday, April 23, 2010

From: Michael White

To: Robert Garrison

Fax: 630-396-2672

Number of Pages (including cover page):\_\_\_\_\_

#### Comments:

Robert. I have filled out what I can on the attached form. As a policy we do not release Salary and Bonus amounts other than on pay stubs, so I have left those areas blank.

Please let me know If you need anything else.

CM 0092 CM 0092

#### 

TRANSMISSION VERIFICATION REPORT

TIME : 04/22/2010 2: NAME : FAX : SER.# : BROM5F148384 : 04/22/2010 21:10

DATE, TIME FAX NO. / NAME DURATION PAGE(S) RESULT MODE

04/22 21:08 16303962672 00:01:52 04 OK STANDARD ECM

CM 0093 CM 0093 Dollars

Date

2-50/710

Security feature are included.
Details on back

DAVID BOSHEA

JULIE L. BOSHEA 4839 CLEARWATER LN.

NAPERVILLE, IL 60564

LaSalle Bank
ABN AMRO
LaSalle Bank N.A.

Chicago, IL 60603 | lasallebank.com

PAY to the order of

03-04

1:0710005051: 5306703868# 01648



#### 

Paychex Use	Only
Client Number	m m m m m m m m m m m m m m m m m m m
Worker Number	
PRS	
Date	
Verified By	

# PAYCHEX® Direct Deposit/Access Card Signup Form

#### Worker Instructions:

- 1. Complete the "WORKER Required Information" section.
- Complete the Direct Deposit, Access Card, or both sections to specify where you want your pay deposited.
- Sign the bottom of the form.

S

Retain a copy of this form for your records. Return the original to your employer.

#### Employer Instructions:

- Complete the "EMPLOYER Required Information" section.
- 2. Return this form to your local Paychex office.

WORKER – Required Information	EMPLOYER – Required Information
JOKER Name David J. TSoshee, Jr. ocial Security Number 387-66-9797	Company Name Campass Marketing, TIVC.  Office/Client Number

#### Complete for DIRECT DEPOSIT I authorize my employer to deposit my wages/salary to the following bank account(s): Checking Bank Account #1 ☐ Savings Bank Account #2 ☐ Checking □ Savings La Salla Bank Name Bank Name I wish to deposit (check one): I wish to deposit (check one): Entire Net Pay ☐ Entire Net Pay \_\_\_\_\_ % of Net □ % of Net ☐ Specific Dollar Amount \$ \_\_\_\_\_ ☐ Specific Dollar Amount \$ \_\_\_\_ Please attach one of the following (check one): Please attach one of the following (check one): Voided check (deposit slips are not accepted) ☐ Voided check (deposit slips are not accepted) □ Bank letter or specification sheet\* "See your local bank representative. □ Bank letter or specification sheet\* \*See your local bank representative.

	Complet	te for ACCESS C	ARD		
I authorize my employer to deposit my w Paychex Access Card Program including th the-counter cash advance fee, and the \$15	e \$2.00 mon	thly maintenance fee, the			
I wish to deposit (check one):					
□ Entire Net Pay □% of Net □ Specific Dollar Amount \$00					
Please print the address where the Access	Card stateme	nts should be mailed.			
Street Address	Apt. #	City		State	Zip
Home Phone No. ()		Date of Birth	/_	/	
Mother's Maiden Name					
☐ Additional Card Requested.					
Additional Cardholder Name					
Additional Cardholder Social Security No		والتنافية المتالية			

Accountholder Signature

(If worker doesn't have authority to authorize deposits to the accountholder's account.)

DP0002 12/05

CM 0095 CM 0095

#### 

TRANSMISSION VERIFICATION REPORT

TIME : 06/28/2007 13 NAME : FAX : SER.# : BROM6F148384 : 06/28/2007 13:31

DATE,TIME FAX NO./NAME DURATION PAGE(S) RESULT MODE

06/28 13:27 18663306441 00:04:12 14 OK STANDARD ECM

CM 0096 CM 0096

#### David J. Boshea, Jr.

#### 4839 Clearwater Lane ~ Naperville, IL 60564 ~ (630) 922-4552 ~ golf4me36@aol.com

#### Career Summary

National Sales professional with progressive experience in the Consumer Products Industry. Diverse product category background in HBC, Grocery and Frozen. Valuable sales management and strategic planning experience in Mass, Drug, Food, Alternate Channels, Club and Convenience. Proven ability to work collaboratively with cross-functional team members to achieve improved demand/supply side performance at customers. Successful in developing long lasting customer relationships at all levels through fact based selling, solid business analysis, trust, effective communications and problem-solving capabilities.

#### PROFESSIONAL EXPERIENCE

Energizer Corporation

6/04 to present

National Team Leader - Sears Holdings, Chicago, Illinois

- ~ Grew sales from \$28 million to \$41 million. ~ Exceeded sales plan by + 10% every year.
- ~ Exceeded operating profit by + 10% every year.
- ~ Exceeded new item distribution plan and consistently have grown market share.
- ~ Drove category growth through account penetration at all levels and areas.
- ~ Develop category solutions as Category Captain.
- ~ Executes supply chain efficiency's and exceed key performance indicators on scorecard.

Magnivision Corporation - Reading Glasses, Division of American Greetings 9/03 to 2/04
National Sales Manager, Chicago, Illinois

- ~ Recruited to manage and cultivate relationships with Magnivision's largest accounts. Account responsibilities for Albertsons, Kmart, Meijer and Walgreens.
- ~ Create, coordinate and communicate account programs along with projects with all in-house support departments.
- ~ Company forced to reorganize and downsize for sale.

#### Wyeth Corporation

9/97 to 9/03

# National Business Development Manager - Kmart, Chicago, Illinois 3/99 to 9/03

- ~ Lead a team of a Category Manager, Category Analyst, and Retail Sales Manager.
- ~ Collaborated in the business development process with focus on strategic planning for the Walgreens, Target and Kmart team.
- ~ Increased sales from \$74M to \$88M at Kmart. Exceeded objectives in 1999 through 2003.
- ~ Successful in reducing costs and surpassing P&L targets +7.6 %. Trade Budget \$6 million.
- ~ Obtained 100% placement of all new items and grew market shares to #1 levels
- ~ Served successfully and with integrity in the Category Captain role at Kmart.
- ~ Drove category growth through account penetration and leverage at all levels.
- ~ Executed supply chain efficiently and successfully hit key performance indicators on scorecard.

#### National Manager Alternate Channels, Baltimore, Maryland

9/97 to 3/99

- ~ Developed and established a National Alternate Channels Department...\$15M in sales.
- ~ Coordinated with Marketing, Finance and Legal Departments in creating National Programs.

CM 0097 CM 0097

~ Established a distribution network with Direct Customers, Distributors and the hiring of Brokers.

Hanover Foods Corporation - Food Manufacturer

2/96 to 9/97

#### Zone Director, Baltimore, Maryland

- ~ Lead a team of 3 Area Managers, 4 Account Executives, 23 Sales Representatives and a separate Broker Organization.
- ~ Developed total sales of \$61 million and accountable for Promotional Funds in excess of \$9 million. Channel responsibility: Grocery, Drug, Convenience and Mass.
- ~ Developed sales relationships with Giant Food and Safeway accounts.
- ~ Exceeded sales and profit objectives +15%. Record sales and profits for the company.
- ~ Won employee of the year.

Advantage Sales & Marketing - Food Broker

5/92 to 2/96

#### Senior Account Executive, Baltimore, Maryland

10/92 to 2/96

- ~ Responsible for sales and administration of 3 major Manufacturers Dow Brands, Colgate and 3M.
- ~ Developed total sales of \$25 million and accountable for Promotional Funds in excess of \$2 million.
- ~ Exceeded Budget 4 years in a row.
- ~ Developed sales at Giant Food and Safeway accounts for multiple companies.
- ~ Participated in first Category Management Plan with Giant Food.
- ~ Won Broker of the year and Presidents cup multiple years. Served on Dow Brands Advisory Committee.

#### Director of Marketing, Baltimore, Maryland

11/90 to 10/92

- ~ Developed and executed creative programs for Manufacturers in all of the operating divisions within Brokerage.
- ~ Lead a staff of 5 employees.
- ~ Exceeded sales and profits with Dow Brands, along with key account responsibilities at Giant Food and Safeway

Wyeth Corporation

12/86 to 11/90

#### District Manager, Baltimore, Maryland

11/89 to 11/90

- ~ Lead a team of 1 Account Executive, 3 Area Managers and
- 11 Territory Managers.
- ~ Developed total sales of \$24 million and accountable for Promotional Funds in excess of \$1 million. Channel responsibility: Grocery, Drug, Convenience and Club.
- ~ Achieved Presidents award with a 22% sales increase.

Sales Planner, Corporate Offices, New York, New York

1/89 to 11/89

CM 0098 CM 0098

- ~ Developed trade/consumer promotional programs.
- ~ Communicated promotional programs to field sales personnel.
- $\sim$  Represented the Sales perspective to Marketing, Manufacturing, Packaging and Distribution disciplines.
- ~ Coordinated National Sales Meeting.

#### Area Manager, Detroit, Michigan

1/88 to 1/89

- ~ Lead sales team of 1 account executive and 6 Territory Managers.
- $\sim$  Drove sales of \$11 million and accountable for Promotional Funds in excess of \$450K
- ~ Account management for Farmer Jack, A&P, F&M, Foodland Distributors and Kroger.
- ~ Channel responsibility: Grocery, Drug, Convenience, Mass and Hardware.
- ~ Achieved first place District with an area sales increase of 14%.
- ~ Won Area Manager of the year.

#### Territory Manager, Lansing, Michigan

12/86 to 1/88

- ~ Developed sales for direct accounts, ad groups and retail customers in the territory.
- ~ Channel responsibility: Grocery, Drug, Convenience, Mass and Hardware.
- ~ Won merchandising and sales contests.
- ~ Achieved double digit sales growth for territory.

#### **EDUCATION:**

Bachelor of Science, Business Administration with a Major in Marketing 1985 Central Michigan University, Mt. Pleasant, Michigan.

#### **COMPUTER / TECHNICAL SKILLS:**

Word, Excel and Power Point. XLerate, Application Manager, Spectra, Panel Data, Pro Space and Customer POS Data.

#### PROFESSIONAL DEVELOPMENT

Dale Carnegie Sales Training

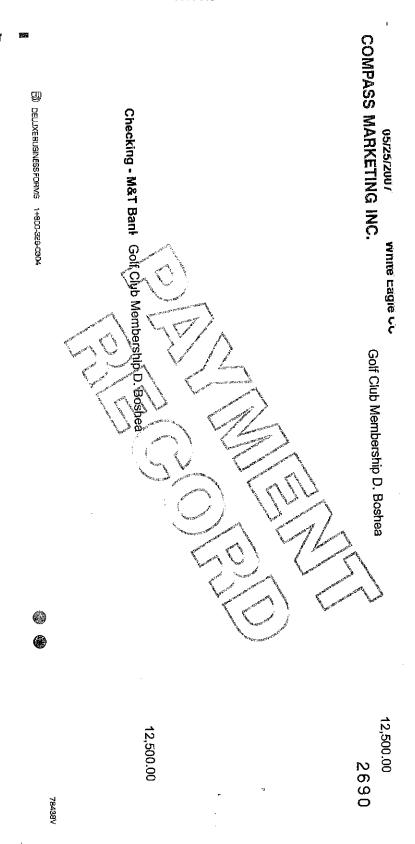
Presentation Skills Seminar - Communispond, Inc.

Category Management Seminar - Dr. Brian Harris; Baltimore/Washington GMR

Mandev 360 Sales/Administrative Training

Interpersonal/Management Skills Seminar

CM 0099 CM 0099



#### Main Identity

From:

<Golf4me36@aol.com>

To: Sent: <mwhite@compassmarketinginc.com> Thursday, May 24, 2007 3:23 PM

Subject:

Follow up

Mike:

Hope all is great. John told me to get with you on a couple of things....

\* Email start up. Also, how do I purchase the lap top

\* Check for \$12,500 for White Eagle Membership. We need to move quick so we get the nice deal. If you can pls. fax a copy of the check made payable to White Eagle at 630-305-6787 attn. RuthAnn Wood. Then you can just mail the check to me and I will deliver it...Home is 5546 Clearwater Lane Naperville, II. 60564.

\* Cell phone.. How do I get this going?

Also, I have left some messages for John but if you talk to him make sure he knows I have the Lowes appt. set for 6/13/07 at 1:00 ....this will be great.

THX Mike and I am looking forward to working with you.

Dave

See what's free at AOL.com.

5400 Caus DR NAPRINULLE IL 60564

# Case 1:21-cv-00309-ELH Document 113-15 Filed 07/31/22 Page 115 of 231

MAY 25,2007 9:53

Model # 4200 Series

START TIME 09:52

SENT TO

16303056787

PAGES RESULT

2 OK

CM 0102 CM 0102

#### **FAX COVER SHEET**



Compass Marketing 612 3<sup>rd</sup> Street, Suite 200 Annapolis, Maryland 21403 (410) 268-0030 ext 202 Efax: (443) 782-2523

mwhite@compassmarketinginc.com

Date: Friday, May 25, 2007

From: Michael White

To: Ms Ruth Ann Wood White Eagle

Fax: 630-305-6787

Number of Pages (including cover page):\_\_2\_\_\_

Comments:

CM 0103 CM 0103

#### David J. Boshea, Jr.

4839 Clearwater Lane ~ Naperville, IL 60564 ~ (630) 922-4552 ~ golf4me36@aol.com

#### Career Summary

National Sales professional with progressive experience in the Consumer Products Industry. Diverse product category background in HBC, Grocery and Frozen. Valuable sales management and strategic planning experience in Mass, Drug, Food, Alternate Channels, Club and Convenience. Proven ability to work collaboratively with cross-functional team members to achieve improved demand/supply side performance at customers. Successful in developing long lasting customer relationships at all levels through fact based selling, solid business analysis, trust, effective communications and problem-solving capabilities.

#### PROFESSIONAL EXPERIENCE

Energizer Corporation

6/04 to present

#### National Team Leader - Sears Holdings, Chicago, Illinois

- ~ Grew sales from \$28 million to \$41 million.
- ~ Exceeded sales plan by + 10% every year. ~ Exceeded operating profit by + 10% every year.
- ~ Exceeded new item distribution plan and consistently have grown market share.
- ~ Drove category growth through account penetration at all levels and areas.
- ~ Develop category solutions as Category Captain.
- ~ Executes supply chain efficiency's and exceed key performance indicators on scorecard.

Magnivision Corporation - Reading Glasses, Division of American Greetings 9/03 to 2/04

#### National Sales Manager, Chicago, Illinois

- ~ Recruited to manage and cultivate relationships with Magnivision's largest accounts. Account responsibilities for Albertsons, Kmart, Meijer and Walgreens.
- ~ Create, coordinate and communicate account programs along with projects with all in-house support departments.
- ~ Company forced to reorganize and downsize for sale.

Wyeth Corporation

9/97 to 9/03

# National Business Development Manager - Kmart, Chicago, Illinois 3/99 to 9/03

- ~ Lead a team of a Category Manager, Category Analyst, and Retail Sales Manager.
- $\sim$  Collaborated in the business development process with focus on strategic planning for the Walgreens, Target and Kmart team.
- $\sim$  Increased sales from \$74M to \$88M at Kmart. Exceeded objectives in 1999 through 2003.  $\sim$  Successful in reducing costs and surpassing P&L targets +7.6 %. Trade Budget \$6 million.
- ~ Obtained 100% placement of all new items and grew market shares to #1 levels
- ~ Served successfully and with integrity in the Category Captain role at Kmart.
- ~ Drove category growth through account penetration and leverage at all levels.
- ~ Executed supply chain efficiently and successfully hit key performance indicators on scorecard.

# National Manager Alternate Channels, Baltimore, Maryland 9/97 to 3/99 ~ Developed and established a National Alternate Channels Department...\$15M in sales.

~ Coordinated with Marketing, Finance and Legal Departments in creating National Programs.

CM 0104 CM 0104

~ Established a distribution network with Direct Customers, Distributors and the hiring of Brokers.

#### Hanover Foods Corporation - Food Manufacturer

2/96 to 9/97

#### Zone Director, Baltimore, Maryland

- $\sim$  Lead a team of 3 Area Managers, 4 Account Executives, 23 Sales Representatives and a separate Broker Organization.
- ~ Developed total sales of \$61 million and accountable for Promotional Funds in excess of \$9 million. Channel responsibility: Grocery, Drug, Convenience and Mass.
- ~ Developed sales relationships with Giant Food and Safeway accounts.
- ~ Exceeded sales and profit objectives +15%. Record sales and profits for the company.
- ~ Won employee of the year.

Advantage Sales & Marketing - Food Broker

5/92 to 2/96

#### Senior Account Executive, Baltimore, Maryland

10/92 to 2/96

- ~ Responsible for sales and administration of 3 major Manufacturers Dow Brands, Colgate and 3M.
- ~ Developed total sales of \$25 million and accountable for Promotional Funds in excess of \$2 million.
- ~ Exceeded Budget 4 years in a row.
- ~ Developed sales at Giant Food and Safeway accounts for multiple companies.
- ~ Participated in first Category Management Plan with Giant Food.
- $\sim$  Won Broker of the year and Presidents cup multiple years. Served on Dow Brands Advisory Committee.

#### Director of Marketing, Baltimore, Maryland

11/90 to 10/92

- ~ Developed and executed creative programs for Manufacturers in all of the operating divisions within Brokerage.
- ~ Lead a staff of 5 employees.
- $\sim$  Exceeded sales and profits with Dow Brands, along with key account responsibilities at Giant Food and Safeway

#### Wyeth Corporation

12/86 to 11/90

#### District Manager, Baltimore, Maryland

11/89 to 11/90

- ~ Lead a team of 1 Account Executive, 3 Area Managers and
- 11 Territory Managers.
- ~ Developed total sales of \$24 million and accountable for Promotional Funds in excess of \$1 million. Channel responsibility: Grocery, Drug, Convenience and Club.
- ~ Achieved Presidents award with a 22% sales increase.

#### Sales Planner, Corporate Offices, New York, New York

1/89 to 11/89

CM 0105 CM 0105

- ~ Developed trade/consumer promotional programs.
- ~ Communicated promotional programs to field sales personnel.
- $\sim$  Represented the Sales perspective to Marketing, Manufacturing, Packaging and Distribution disciplines.
- ~ Coordinated National Sales Meeting.

#### Area Manager, Detroit, Michigan

1/88 to 1/89

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Presentation Skills Seminar - Communispond, Inc.

Category Management Seminar - Dr. Brian Harris; Baltimore/Washington GMR

Mandev 360 Sales/Administrative Training

Interpersonal/Management Skills Seminar

CM 0106 CM 0106



# Salary Reduction Form

Plan Year ~ January 1, 2007 through December 31, 2007

tion	Name: David J. Poshea Jr. S.S.# 382-44-9797									
	Address: 4839 Clearwater LN									
Your Information	City: Naperville State: IL Zip: 60564									
Your In	Home Phone: 630 - 922	-4552	Wo	rk Phone: 630	0-922.7	965				
	Marital Status: ☐ Single/Divorce	ed 🗡 Marrie	ed Dat	te of Birth: 4 /	211962					
	Enrollment Type:   Open Enrollm	ent New I	Hire Effe	ective Date of Cov	/erage: 6 1/5 /	07				
	Per Pay Deductions	Employee	Emp/Child(ren)	Emp/Spouse	<u>Family</u>	Waiving				
Medical & Dental Plan	Medical CareFirst - HSA HMO	□ \$18.20	□ \$33.60	□ \$41.80	□ \$51.00	□ \$0.00				
Mec	Medical CareFirst - HSA PPO	□ \$61.70	□ \$114.60	□ \$142.30	<b>№</b> \$172.50	□ \$0.00				
	Dental CareFirst - PPO	□ \$5.20	□ \$16.20	□ \$22.20	<b>⋈</b> \$29.20	□ \$0.00				
Authorization & Certification	I authorize Compass Marketing, Inc. to make the appropriate payroll deductions for the coverages that I elect. I understand that there can be no change permitted to the above elections during the plan year unless there is a change in my life status and I notify the Human Resources Department of this change in writing (within 30 days of the lifestatus change).  Employee Signature:  Date: L - / 2 - 0 7									
Waiver	I hereby certify that I have been offered decided NOT to elect coverages offered be able to enroll again until the next op the Human Resources Department of the Employee Signature:	above. Tunderstan en enrollment period is change in writing	d that by waiving cove d (November 1st) unle (within 30 days of the	erage now for me a ss I have a qualifie t life status change)	nd/or my dependent					

CM 0107 CM 0107

Case 1:21-cMaryland New Hire Registry Reporting F

Send completed forms to: Maryland New Hire Registry

PO Box 1316

Baltimore, MD 21203-1316

Fax: (410) 281-6004 or toll-free fax 1 (888) 657-3534

To ensure the highest level of accuracy, please print neatly in capital letters and avoid contact with the edges of the boxes. The following will serve as an example:

C

EMPLOYER I Federal Employer Id Number (FEIN):	INFORMATION
Todoral Employor id Humbor (1 Emy,	State Unemployment Insurance Number (MD Only SUIN
Please use the same FEIN that appears on quarterly wage reports.	
Employer Name:	If SUIN not issued yet, please write "APPLIEDFOR" in the above box. If Exempt, write "EXEMPT".
Employer Address (Please indicate the address where the Inco	oma Withholding Orders should be sonth.
	The Vitalioning Gracis should be song.
Employer City:	
Improyer only.	Employer State: Zip Code (5 digit):
Employer Phone (optional):	
Employer Phone (optional).	Employer Fax (optional):
Contact Name (optional):	
Email (optional):	
EMPLOYEE INFO	DRMATION
Employee Social Security Number (SSN):	Date of Hire (mm/dd/yyyy):
382669797	04052007
Employee First Name:	Middle Initial
David	(optional):
Employee Last Name:	
Bosheg Jr.	
Employee Address:	
4839 Clearwat	er 29 ne
$\frac{ 7 8 3 9}{ C / e a r w a + }$ Employee City:	
	Employee State: Zip Code (5 digit):
	TL 60564
	Dollars and Cents): Hourly Monthly Yearly
04021942 1800	
Are health care benefits available to employee? (Y/N):	Employee Gender (M)ale/(F)emale: バー
	Employed Condoi (M)ale/(I )elliale. [) [

Reports must be submitted within 20 days of the date of hire or rehire

Rev (09/02)

Questions? Call us at (410) 281-6000 or toll-free 1 (888) MDHIRES (634-4737). Report online at www.mdnewhire.com



COMPASS MARKETING, INC. - TRAVEL ADVANCE REQUEST

Name: David Boshea

Social Security Number XXX-XX 9797

Department: Compass Marketing Inc.

Mailing Address: 612Third Street Suite 200 Annapolis Maryland 21403

APPROVAL (Dept. Head)

Advance Amount: \$1000.00

Authorizing Signature: John D. White / Michael R. White

Date September 4, 2007

#### RECEIPT OF ADVANCE

I acknowledge receipt of monies shown below as a personal liability until settlement is made by submitting an authorized travel expense report and the return of unspent funds.

**Employees Signature** 

Total \$ 1,000 "

Check # 2814

#### SETTLEMENT OF ADVANCE

I certify that the money advanced on this request has been returned or its expenditure substantiated by the submission to the cashier of a properly approved travel expense report.

Cashier's Signature

Date

#### Case 1:21-cv-00309-ELH Document 113-15 Filed 07/31/22 Page 123 of 231

## Illinois Withholding Allowance Worksheet

#### **General Information**

Complete this worksheet to figure your total withholding allowances. **Everyone** must complete Step 1.

Complete Step 2 if

- · you (or your spouse) are age 65 or older or legally blind, or
- you wrote an amount on Line 4 of the Deductions and Adjustments Worksheet for federal Form W-4.

If you have more than one job or your spouse works, you should figure the total number of allowances you are entitled to claim. Your withholding usually will be more accurate if you claim all of your allowances on the Form IL-W-4 for the highest-paying job and claim zero on all of your other IL-W-4 forms.

You may reduce the number of allowances or request that your employer withhold an additional amount from your pay, which may help avoid having too little tax withheld.

ments Worksheet for federal Form W-4.	help avoid having too little tax withheld.	
Step 1:Figure your basic personal allowa	NCES (including allowances for depende	ents)
Check all that apply:  M No one else can claim me as a dependent.		
I can claim my spouse as a dependent.		
1 Write the total number of boxes you checked.		. 2
2 Write the number of dependents (other than you or your spouse) y	(OII	
will claim on your tax return.		2 2
3 Add Lines 1 and 2. Write the result. This is the total number of bas	ic	-
personal allowances to which you are entitled.		3 4
4 If you want to have additional Illinois Income Tax withheld from you	ır	,
pay, you may reduce the number of basic personal allowances or h	nave	
an additional amount withheld. Write the total number of basic pers	sonal	(5
allowances you elect to claim on Line 4 and on Form IL-W-4, Line	1.	4 8
Step 2: Figure your additional allowances		
Check all that apply:		
☐ I am 65 or older. ☐ I am legally blind.		
☐ My spouse is 65 or older. ☐ My spouse is lega	lly blind.	
5 Write the total number of boxes you checked.		5
6 Write any amount that you reported on Line 4 of the Deductions ar	nd Adjustments	
Worksheet for federal Form W-4.		6
7 Divide Line 6 by 1,000. Round to the nearest whole number. Write	the result on Line 7.	7
8 Add Lines 5 and 7. Write the result. This is the total number of addito which you are entitled.	tional allowances	45
9 If you want to have additional Illinois Income Tax withheld from you		8
the number of additional allowances or have an additional amount	withhold Write the total	
number of additional allowances you elect to claim on Line 9 and o	n Form II -W-4 Line 2	0
The second of th	TOTAL WA, ENIO Z.	9
lote: If you have non-wage income and you expect to owe Illinois Invithheld from your pay. On Line 3 of Form IL-W-4, write the additional  Cut here and give the certificate to your en  Illinois Department of Revenue  IL-W-4 Employee's Illinois Withholding Allo	amount you want your employer to withhold.  nployer. Keep the top portion for your records	an additional amou
器 Z 1, L 9 7 9 7	1 Write the total number of basic allowances that you	1 8
peial Security number	are claiming (Step 1, Line 4, of the worksheet).	
David Boshea, Jr	Write the total number of additional allowances that you are claiming (Step 2, Line 9, of the worksheet).	
ame 1/676 01	3 Write the additional amount you want withheld	۷
4819 Clearwayer, LY	(deducted) from each pay.	3
reet address	I certify that I am entitled to the number of withholding	
Majorville, FL Corry  State ZIP	This certificate.	6-12-07
neck the box if you are exempt from federal and Illinois Withholding Income Tax.	Your signature  Employer: Keep this certificate with your records. If you have	Date referred the employee's
This form is authorized as outlined by the Illinois Income Tax Act. Disclosure of this information is REQUIRED. Failure to provide information could result in a penalty. This form has been approved by the Forms Management Center.	federal certificate to the Internal Revenue Service (IRS) and the disregard it, you may also be required to disregard this certificate to the IRS, refer this certificate to the IRS, refer this certificate to the Illinois Department of Revenue for Income Tax Regulations 86 III. Adm. Code 100.7110.	he IRS has notified you to cate. Even if you are not
-W-4 (R-12/06)		

CM 0110 CM 0110

### Form W-4 (2006)

Purpose. Complete Form W-4 so that your employer can withhold the correct federal income tax from your pay. Because your tax situation may change, you may want to refigure your withholding each year.

Exemption from withholding. If you are exempt, complete only lines 1, 2, 3, 4, and 7 and sign the form to validate it. Your exemption for 2006 expires February 16, 2007. See Pub. 505, Tax Withholding and Estimated Tax.

Note. You cannot claim exemption from withholding if (a) your income exceeds \$850 and includes more than \$300 of unearned income (for example, interest and dividends) and (b) another person can claim you as a dependent on their tax return.

Basic instructions. If you are not exempt, complete the Personal Allowances Worksheet below. The worksheets on page 2 adjust your withholding allowances based on itemized deductions, certain credits, adjustments to income, or twoearner/two-job situations. Complete all worksheets that apply. However, you may claim fewer (or zero) allowances

Head of household. Generally, you may claim head of household filing status on your tax return only if you are unmarried and pay more than 50% of the costs of keeping up a home for yourself and your dependent(s) or other qualifying individuals. See line E below.

Tax credits. You can take projected tax credits into account in figuring your allowable number of withholding allowances. Credits for child or dependent care expenses and the child tax credit may be claimed using the Personal Allowances Worksheet below. See Pub. 919, How Do I Adjust My Tax Withholding, for information on converting your other credits into withholding allowances.

Nonwage income. If you have a large amount of nonwage income, such as interest or dividends, consider making estimated tax payments using Form 1040-ES, Estimated Tax for Individuals. Otherwise, you may owe additional tax.

Two earners/two jobs. If you have a working spouse or more than one job, figure the total number of allowances you are entitled to claim on all jobs using worksheets from only one Form W-4. Your withholding usually will be most accurate when all allowances are claimed on the Form W-4 for the highest paying job and zero allowances are claimed on the others.

Nonresident alien, If you are a nonresident alien, see the Instructions for Form 8233 before completing this Form W-4,

Check your withholding. After your Form W-4 takes effect, use Pub. 919 to see how the dollar amount you are having withheld compares to your projected total tax for 2006. See Pub. 919, especially if your earnings exceed \$130,000 (Single) or \$180,000 (Married).

Recent name change? If your name on line 1 differs from that shown on your social security card, call 1-800-772-1213 to initiate a name change and obtain a social security card showing your correct name.

cre	edits, adjustments to income, or two-		rect name.	said showing your c
_	Personal Allowances Workshe	et (Keep for y	our records.)	
A	Enter "1" for yourself if no one else can claim you as a dependent			A /
	<ul> <li>You are single and have only one job; or</li> </ul>		]	7 7 1
В	Enter "1" if: You are married, have only one job, and your sp	ouse does n	ot work; or	в О
	Your wages from a second job or your spouse's wa	ages (or the to	otal of both) are \$1,000 or less	1000
C	Enter "1" for your spouse. But, you may choose to enter "-0-" if you	ou are marrie	od and house sithers - well	se or
	more than one job. (Entering -o- may neip you avoid having too li	ittle tax withh	neld.)	c /
D	the number of dependents (other than your spouse or yourself) y	ou will claim	on your tax return	D 2
E	Enter "1" if you will file as head of household on your tax return (s	ee conditions	s under Head of household about	) _ E O
F	Enter 1 if you have at least \$1,500 of child or dependent care e	xpenses for	which you plan to claim a gradit	F _/
0	(Note: Do not include child support payments. See Pub. 503, Child	and Depend	dent Care Expenses, for details.)	
G	Critic Tax Credit (including additional child tax credit):			
	• If your total income will be less than \$55,000 (\$82,000 if married),	enter "2" for	r each eligible child.	
	<ul> <li>If your total income will be between \$55,000 and \$84,000 (\$82,000 child plus "1" additional if you have four or more eligible children.</li> </ul>	and \$119,00	00 if married), enter "1" for each eli	gible D
Н	Add lines A through G and enter total here. (Note. This may be different from the	e number of ex	remotions you claim on your tay sature	G
	For accuracy, [ • If you plan to itemize or claim adjustments to in	come and w	ant to reduce your withholding po	the Dadustin
	and ridgestificitis worksheet on page 2.			
	worksheets that apply. If you have more than one job or are married and you exceed \$35,000 (\$25,000 if married) see the Two-Farner.	u and your sp	ouse both work and the combined ea	rnings from all jobs
	exceed \$35,000 (\$25,000 if married) see the Two-Earner.  If neither of the above situations applies, stop he	I WO-JOB WO	richagt on page 2 to avoid boving to-	PROLE CONTRACTOR OF CONTRACTOR
	Cut here and give Form W-4 to your employed			Form W-4 below.
	withment of the Treasury all Revenue Service Whether you are entitled to claim a certain number subject to review by the IRS. Your employer may be Type or print your first name and middle initial.	required to se	end a copy of this form to the IRS.  2 Your social s	2006
-	1/601	, 01.	382 16	9797
	Home address (number and street or rural route)	3 Single	Married Married, but withhold	at higher Single rate
	City or town, state, and ZIP code	Note. If married, I	but legally separated, or spouse is a nonresident alle	en, check the "Single" box
	Naperville, IL. 60564	4 If your la	st name differs from that shown on you	ur social security
E			ck here. You must call 1-800-772-1213 f	or a new card. ▶ ∟
5	Total number of allowances you are claiming (from line H above or	from the app	olicable worksheet on page 2)	5 9
7	Additional amount, if any, you want withheld from each paycheck			6 \$
•	I claim exemption from withholding for 2006, and I certify that I mee	t both of the	following conditions for exemption	1.
	<ul> <li>Last year I had a right to a refund of all federal income tax withh</li> <li>This year I expect a refund of all federal income tax withheld bed</li> </ul>	eld because	I had no tax liability and	
	If you meet both conditions, write "Exempt" here	ause i expe	ct to have no tax liability.	
Inde	r penalties of perjury. I declare that I have examined this certificate and to the best	of my knowled	▶ 7	St. Co.
orn	n is not valid ss you sign it.)		Date > 6-12-07	Diete.
8	Employer's name and address (Employer: Complete lines 8 and 10 only if sending	to the IRS.)		tification number (EIN)
			(optional)	
or I	Privacy Act and Paperwork Reduction Act Notice, see page 2.		Cat. No. 102200	Form M-A topos

CM 0111 CM 0111



# Health Savings Account Application

Account Owner Information (Please print)
Social Security Number 382-16-979 Date of Birth 04-02-1962 Email BANASSING TINGT
First Name DOSHEA J.
Address 4839 CLEARWATER LANE City NAPERUILE State IL Zip 6056
Home Phone 30 - 922-4532 Bus. Phone 30 - 922-7765 Mother's Maiden Name WILLE
Driver's License Number B200 1706209 State Issued IZ Issue Date 1027-05 Expiration Date 4-2-09
Note: To help the government fight the funding of terrorism and money laundering activities, Federal law requires all financial institutions to obtain, verify, and record information that identifies each person who opens an account. What this means for you: When you open an account, we will ask for your name, address, date of birth and 'other information that will allow us to identify you. We may also ask to see your driver's license or other identifying documents.
Employer Information
Employer Name CMARS 9 MAPLETANATING Address_
TIN Certification: Under Penalties of perjury, the undersigned certifies that: (1) The number shown on this form is the correct Taxpayer Identification Number for the account owner (or owner is waiting for a number to be issued,) and
(2) The account owner is not subject to backup withholding. Either the owner has never been notified by the Internal Revenue Service (IRS) as being subject to backup as a result of a failure to report all interest of dividends, or the IRS has notified the owner that the owner is no longer subject to backup withholding.  (3) The account owner is a U.S. person (including a U.S. resident alien.)
You, the undersigned, must cross out item (2) above if the IRS has notified you that you are currently subject to backup withholding because of underreporting interest or dividends on you tax return. However, if after being notified by the IRS that you were subject to backup withholding you receive another notification from the IRS that you are no longer subject to backup withholding, do not cross out item (2).
Print Tax ID Number of Primary Owner  Signature of Tax ID Number Owner  or Agent
Agreement: The terms "you" and "your" refer to all persons or entities who sign or are designated on this Signature Card and to each of them, unless the

Agreement: The terms "you" and "your" refer to all persons or entities who sign or are designated on this Signature Card and to each of them, unless the context clearly indicates otherwise. The terms "our," "us," and "we" refer to Sandy Spring Bank. By signing the signature card, you: (1) agree to be bound by the terms and conditions in the separate Deposit Account Agreements and Disclosures and Deposit Account Fee Schedule; the Rate Sheet if you are opening an interest bearing account; your IRA/ESA Receipt if you are opening an IRA or Coverdell Education Saving (ESA) account; your Time Deposit Receipt if you are opening a Time Deposit Account (all referred to as "Account Documents"), as may be amended from time to time; (2) acknowledge receipt (if more than one then all acknowledge that one of them has received on behalf of all of them) of a copy of all Account Documents which establish the type of account, terms of the account, and relationship between you and us as to the account.

CM 0112 CM 0112

ADDITIONAL SERVICES	STATEMENTS
☐ Order Wallet Style Checks w/ Deposit Tickets (Optional) \$9.95 will be deducted from your account for a book of 30 checks ☐ Order Duplicate Style Checks w/ Deposit Tickets (Optional) \$11.95 will be deducted from your account for a book of 30 checks	☐ I understand I will receive a monthly paper statement with check images for a fee of \$2 per month unless I enroll in free online banking service and <b>Opt-In for e-Statements</b> . e-Statements are statements delivered electronically. (Online enrollment is to be completed within first 30 days after account opening.)
☐ Second HSA Visa Debit Card (Optional)	within that 30 days after account opening.)
Beneficiary Information	
The following individual(s) or entity shall be my primary and/or contingent the individual or entity will be deemed to be a primary beneficiary. If more percentages are indicated, the beneficiaries will be deemed to own equal state beneficiaries with no share percentage indicated will also be deemed to sha his or her interest and the interest of his or her heirs shall terminate compleshall be increased on a pro-rated basis. If no primary beneficiary(ies) survidesignated share of my account. If all the named beneficiaries die before your estate. Beneficiaries may be changed by completing a new form prior	e than one primary beneficiary is designated and no distribution hare percentages in the account. Multiple contingent are equally. If primary or contingent beneficiary dies before me, etely, and the percentage share of any remaining beneficiary(ies) wes me, the contingent beneficiary(ies) shall acquire the rou, or no beneficiary is named, the H S A funds will be paid to

Name JULIEL. BOSHAA Address SAME	Relationship W/FE	Date of Birth	Social Security # 362-86-1289	Primary  Contingent	% of Benefit
Name ASHLEG - STEPHANTE Address	Relationship  ACGUTTUS	12-25-74	Social Security # 216-35-34025 216-43-0421	Primary  Contingent	% of Benefit

If this account is being opened with a rollover or transfer deposit, I certify that the deposit qualifies under IRS Code Section 223. I understand that periodic service charges or other designated fees, as designated in our Deposit Account Booklet, for maintaining the HSA will be deducted from the assets in the HSA.

I certify that I meet the eligibility requirements for the type of deposit I am making and that I am covered by a high deductible health plan that qualifies me to open an HSA. I acknowledge receipt of and agree to the Health Savings Account Custodial Agreement, (Form 5305-C). I have received no tax or legal advice from Sandy Spring Bank and will seek the advice of my own tax or legal professional to determine my eligibility for this type of account and associated deposits and/or withdrawals. I have received a copy of the Application, the 5305-C Plan Agreement, the Deposit Account Agreement and Rate Sheet. I understand that the terms and conditions that apply to this HSA are contained in this Application, the Plan Agreement, the Deposit Account Booklet, and Rate Sheet. I agree to be bound by those terms and conditions.

I request a HSA Visa Debit Card. I acknowledge the receipt of and agree to the Electronic Banking Disclosure and Agreement. Certain fees may apply. Refer to the Deposit Account Fee Schedule for current pricing.

I authorize Sandy Spring Bank to provide my HSA Account number and any necessary information to my employer to set up a preauthorized transfer.

Account Owner Signature

earlier beneficiary designations which may apply to this H S A.

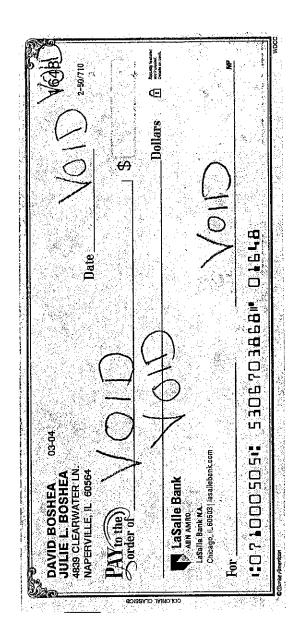
Date

SSB Signing as Custodian

November 2, 2006 Date

Member FDIC

CM 0113 CM 0113



CM 0114 CM 0114

Payd 1200 pf 231

**Effective Date** 

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#### THIS IS NOT AN APPLICATION FOR INSURANCE

### **EMPLOYEE ELECTION FORM**

Team #	
Carrier Group #	(See Coverage Boxes

Last Name	Poshea		First Name David				M.I.	Empl	oyer Compass	Marketing :	TNC
Street Address	4839	1	ake Lan	4				-	Social	Security Number	
City	11		100	St	ate Zip			Sex	30	Date of Birth	11
	Vapervill			IL	- 605			DM:	ale  Female	4-2-6	2
Home Telepho	ne # Bus	iness Teleph	one # Marit	al Stat	tus	D	ate of M	arrjage	20	Date of Full-Tin	ne Hire
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Are you now as	tively at work	on a run-time	e dasis for this ei	mploy	er (as define	d in y	our insu	rance co	ontract)?	Hours Worked/	Week
Occupation	1 1	10	1 / -			_			71	Full-Time	
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Carrier		Carrier		Carr	ier				☐ Waive Cove	AD&D (if offered)	
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Over 65 & Ret		☐ Waive Co	overage*		TD (if offere	d) 🗆	Waive Co	verage*	□ VOL. STD		
Over 65 & Wo		Family Denti			OL. LTD				Plan #		
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++If enrolling in	n HMO coverage		maccaga on poss	Bene	III D	ICII		/Mo.	Carrier	offered by my emplo	
noted above, I at	ttest that I have	read the "Wa	iver of Insurance	e Cove	rage" inform	ij i na nation	as outli	ea any oj	the coverages of	ffered by my emplo	oyer as
**Dependent denti	st #'s if different t	rom above:			age mjorn	iation	us outil	neu on u	ne reverse sine o	inis jorm.	_
Last,	Full First,	M.I.	Social Secu Number		Birth	6	Stu-	Dis-	For HMO	& POS Plans:	Existing
Emp 77			- Number		Date	Sex	dent (Y/N)	abled (Y/N)	OBGyn Provide	re Provider & # er & # (if required)	Patient (Y/N)
Boshea,	Jr Dan	dJ					M	M			Y
Sp Boshen	Julie	2	362,86-1	289	4/19/62	F	M	14			Y
Chd Boshen	Ashley	L	216-35-3	405	3/4/92	F	Y	M			Y
Chd Boshea	Stephanie	T	216-43-01	421	12/25/94	P	4	KI.			Y
Chd	/		1				1	_14			
MANDATORY Do you/dependent	OTHER HE	ALTH INSUR	ANCE INFORM	ATION	Please note	Var	must =	mlat at	100010 0004	AT MILITARY AND ADDRESS OF THE ADDRE	
Do you/dependent	s have health	coverage with	another insurer?	□Yes	s ≥ No If	Yes: 1	Effective	Date		edical coverage is w	aived.
Who is covered? L	☐ Self ☐ Spor	ise 🗆 Famil	y Other carrier	name/	policy#			Date			
Will this coverage	be continued? [	☐ Yes ☐ No	If No: Term. D	Date:							-
Are you covered b	y Medicare?	Yes No:									
Are any of your de	pendents covere	d by Medicar	e? Yes You	Effec	tive Date (Pa	rt A)	11	Effectiv	re Date (Dart D)	_/_/_ Medicare	
ERTIFICATION:	I hereby certify	that I am the	spouse parent or	r legal	quardian of	he der	andonta	chours o	base (Fait B)	and that knowingly	#
atement of claim	ana/or applicall	on containing	anv materially i	talse u	tormation 1	mtonti	onally o	v minta	stionally on non	andling to Control	filing a
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ith respect to myse	oit, is iess than /	576 Of thy Cui	rent monthly ear	nings (	ou% for inte	rmedia	ate disab	ility inco	me).		
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					CM 0115					CM 0115	

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### **WAIVER OF INSURANCE COVERAGE**

### Medical – Notice of Special Enrollment Period

If you are declining enrollment for yourself or your dependents (including your spouse) because of other health insurance coverage, you may in the future be able to enroll yourself or your dependents in this plan, provided that you request enrollment within 30 days after your other coverage ends. If you decline enrollment for yourself or your dependents because of other health insurance coverage, you must complete the section titled "other health insurance coverage" on the front of this form in order to preserve your special enrollment rights in the future. If you are declining coverage for yourself or your dependents for any other reason, you cannot join the Plan later unless you have a new dependent as a result of marriage, birth, adoption, placement for adoption, or during open enrollment period, if applicable. You may then be able to enroll yourself and your dependents, provided that you request enrollment within 31 days after the marriage, birth, adoption, or placement for adoption.

If you decline coverage for yourself or a dependent because of other health coverage and you fail to fill out the "other health insurance coverage" section on the front of this form (or provide written proof from the other plan) or if you fail to request plan enrollment within 30 days after your (and/or dependent's) other coverage ends, you will not be eligible to enroll yourself or your dependents during the special enrollment period discussed above and you will need to wait until the next open enrollment period (if available) to enroll in the plan's health coverage.

#### Non - Medical

If you are voluntarily declining the non-medical coverages provided by your employer you may choose to enroll at a later date depending upon the availability of coverage which is now being waived. With the late enrollment your cost may be higher, a health questionnaire may be required and/or the effective date of your coverage may be delayed.

### **IMPORTANT MESSAGE FOR HMO MEMBERS**

If you have any questions concerning the benefits and services that are provided by or excluded under this agreement, please contact a membership services representative before signing this enrollment card.

\admin\lynn\FinalForms\ElectionForm

CM 0116 CM 0116

#### 

**Department of Homeland Security**U.S. Citizenship and Immigration Services

OMB No. 1615-0047; Expires 03/31/07

Employment Eligibility Verification

Please read instructions carefully before completing this form. The instructions must be available during completion of this form. ANTI-DISCRIMINATION NOTICE: It is illegal to discriminate against work eligible individuals. Employers CANNOT specify which document(s) they will accept from an employee. The refusal to hire an individual because of a future expiration date may also constitute illegal discrimination.

Section 1. Employee Information and Verification. To	o be completed and signed by emple	oyee at the time employment begins.
Print Name: Last Boshea, Jr Pavid	Middle Initial	Maiden Name
Address (Street Name and Number)	Apt. #	Date of Birth (month/day/year)
4839 Clearwoter LN	, p,	4 /Z / 196 2
City State	Zip Code	Social Security #
Maperville IL	405-64	782-66-9797
I am aware that federal law provides for	l attest, under penalty of perjur	y, that I am (check one of the following):
imprisonment and/or fines for false statements or	A citizen or national of t	he United States
use of false documents in connection with the	A Lawful Permanent Re	
completion of this form.	An alien authorized to w	ork until
	(Alien # or Admission #)	· · · · · · · · · · · · · · · · · · ·
Employee's Signature Dawly Oss 22		Date (month/day/year) 6 /12 / 200 7
Preparer and/or Translator Certification. (To	he completed and signed if Section	
other than the employee.) I attest, under penalty of perjury, of my knowledge the information is true and correct.	be completed and signed if Section , that I have assisted in the completi	1 is prepared by a person ion of this form and that to the best
Preparer's/Translator's Signature	Print Name	
t ispain, of translation of digrature	Fillit Name	
Address (Street Name and Number, City, State, Zip Code)	<u></u>	Date (month/day/year)
		Date (monthibay/year)
Section 2. Employer Review and Verification. To be co examine one document from List B and one from List C, as listed any, of the document(s).  List A OR	on the levelse of this form, and N	ecord the title, number and expiration date, if
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Document title: 15 10 55 10 17 Issuing authority: 13 14 Document #: 3 10 0 8 8 5 2  Expiration Date (if any): 3 2 20 17 Document #:  Expiration Date (if any):  CERTIFICATION - lattest, under penalty of periury, that I ha	ve examined the document(s)	presented by the above named
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# Case 1:21-cv-00309-ELH Document 113-15 Filed 07/31/22 Page 131 of 231 OMB No. 1615-0047; Expires 03/31/07

**Department of Homeland Security**U.S. Citizenship and Immigration Services

#### **Employment Eligibility Verification**

Please read instructions carefully before completing this form. The instructions must be available during completion of this form. ANTI-DISCRIMINATION NOTICE: It is illegal to discriminate against work eligible individuals. Employers CANNOT specify which document(s) they will accept from an employee. The refusal to hire an individual because of a future expiration date may also constitute illegal discrimination.

a rataro expiration auto may also	sonotitate inegal ai	oormination.		
Section 1. Employee Information	and Verification. To	be completed and si	gned by employe	e at the time employment begins.
Print Name: Last Boshea, Jr	First		Middle Initial	Malden Name
Address (Street Name and Number) 4839 Clear water		· · · ·	Apt. #	Date of Birth (month/day/year) 4 /Z / 1942
City Maperville	State T L		Zip Code りよる 4	Social Security # 782-44-9797
I am aware that federal law provid imprisonment and/or fines for fals use of false documents in connect completion of this form.  Employee's Signature  Preparer and/or Translator	se statements or stion with the	A citizen A Lawful An atien a (Allen # o	or national of the Permanent Resid authorized to work r Admission #)	ent (Allen #) A  s until  Date (month/day/year)  6 /12 / 200 7
other than the employee.) I attest, of my knowledge the information is Preparer's/Translator's Signature	under penalty of perjury,	that I have assisted  Print Nam	in the completion	of this form and that to the best
Address (Street Name and Number	er, City, State, Zip Code)			Date (month/day/year)
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Signature of Employer or Authorized Represer Business or Organization Name	ddress (Street Name and	1 MUSI	turis.	Date (month/day/year)
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A. New Name (if applicable)			B. Date	of Rehire (month/day/year) (if applicable)
C. If employee's previous grant of work author eligibility.  Document Title:	zation has expired, provide Document #:	de the information be		nent that establishes current employment  Date (if any):
l attest, under penalty of perjury, that to the presented document(s), the document(s) ! !				
Signature of Employer or Authorized Represer				Date (month/day/year)

**NOTE:** This is the 1991 edition of the Form I-9 that has been rebranded with a current printing date to reflect the recent transition from the INS to DHS and its components.

Form I-9 (Rev. 05/31/05)Y Page 2

From: Rebecsa 95215ki 610691819 Page 132 of 231

Sent: Thursday, March 5, 2020 1:44:23 PM

To: Erin Songer < Esonger@compassmarketinginc.net>

Subject: Personnel File of David Boshea

Erin,

I am an attorney in Naperville, Illinois and I am representing Dave Boshea with regard to the termination of his employment by Compass Marketing.

With this message I am requesting a copy of Dave's personnel file. Please send me copies of all documents regarding his employment with Compass that have been maintained in the normal course of business.

Time is of the essence in this matter. Please confirm receipt of this message.

If you have questions, you may contact me directly. Thank you, Rebecca

Rebecca Boyd-Obarski Nagle, Obarski & Holzhauer P.C. 222 S. Mill St., Suite 200 Naperville, IL 60540 630-355-8100 630-355-8185 (fax)

# Please note our new name (formerly Nagle Obarski P.C.) and our new email address domain: naglelawfirm.com.

This e-mail transmission contains information from Nagle, Obarski & Holzhauer P.C. that may be confidential or privileged. If you are not the intended recipient, please be aware that any disclosure, copying, distribution or use of this message, its contents, or any attachments is prohibited. Any wrongful interception of this message is punishable as a federal crime. If you have received this message in error, please contact us immediately by telephone (630.355.8100), by fax (630.355.8185) or by electronic mail to <a href="mailto-julie@naglelawfirm.com">julie@naglelawfirm.com</a>. This communication is believed to be free of any virus or other defect that might negatively affect any computer system which receives and opens it, no responsibility is accepted by the sender or Nagle, Obarski & Holzhauer P.C. for any loss or damage arising in any way if such a virus or defect exists. The recipient has full responsibility to ensure that the communication is virus or defect free.

https://outlook.office365.com/mail/inbox/id/AAQkADkwMTliNzVkLWlzNWltNDU0MC05ZmQ1LThjZjUwNzdiNjcyMQAQAJ2kZxJmkErqhfQ%2B%2F27yf... 1/1

CM 0119 CM 0119

#### **Dave Boshea Employment Terms**

Rebecca Obarski < robarski@naglelawfirm.com>

Thu 3/5/2020 1:48 PM

To: John White <jwhite@compassmarketinginc.net>

John,

As you know, I am an attorney in Naperville, Illinois and a friend of Dave and Julie Boshea.

Yesterday afternoon I met with Dave regarding the termination of his employment by Compass Marketing and am representing him in this matter. If you are represented by an attorney in this matter please forward this message to him or her and ask them to contact me, it would not be appropriate for me to communicate directly with you if Compass is represented.

In addition to being surprised by the abruptness of the decision, it was disturbing that Dave was given the standard Severance Agreement rather than the terms of the Agreement Relating to Employment and Post-Employment Competition that you and he negotiated in 2007. By the terms of that agreement Dave is entitled to a severance payment of \$540,000 and if paid he would be obligated to the restrictive covenants in the agreement. It is unfortunate that Dave has not been able to locate a signed copy of that agreement. We believe it must be in his personnel file (and we have requested a copy of that file from Erin Songer).

I understand that Compass may be in need of reorganization, but I would expect that it would honor its contracts.

I appreciate your prompt attention to this matter. If I do not hear back from you by noon tomorrow, Friday, March 6, 2020, I will advise Dave that Compass is not honoring the 2007 employment terms and that he should proceed accordingly.

Regards, Rebecca

Rebecca Boyd-Obarski Nagle, Obarski & Holzhauer P.C. 222 S. Mill St., Suite 200 Naperville, IL 60540 630-355-8100 630-355-8185 (fax)

# Please note our new name (formerly Nagle Obarski P.C.) and our new email address domain: naglelawfirm.com.

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CM 0120 CM 0120

#### follow up on separation

#### J Boshea <jlboshea@outlook.com>

Mon 3/16/2020 12;42 PM

To: Erin Songer < Esonger@compassmarketinginc.net >

Cc: John White <jwhite@compassmarketinginc.net>; Julie Boshea <Julie@naglelawfirm.com>

4 attachments (436 KB)

doc20200313165414[194].pdf; doc20200313165422[195].pdf; doc20200313165428[196].pdf; doc20200313165435[197].pdf;

Hi Erin,

Hope your well. Haven't heard back from you and we have not received anything. Please keep us posted. Thank

**Best** 

Dave

Erin,

Hope your well. In follow up I wanted to follow up on my Compass exit payments:

- Accrued vacation minimum 6 weeks \$ 22,500 minimum
- Accrued Personal Days.... 10 Days \$7,500
- Severance 2 weeks \$7,500
- Expenses owed \$11,500
- Payment through last day of employment \$2,250
- Misc Payments: My exit plan agreement with John White \$540,000 earned after 3 years of service ( John White has agreement ), John White (9-16-2015) committed to me back pay from salary reduction of 10-15-2015 in amount of \$95,000 YTD.

Due to the suddensence of my termination please pay these funds direct deposit 3/16/2020. Thank You. Best,

Dave

Sent from Mail for Windows 10

CM 0121

#### RE: follow up on separation

#### J Boshea <jlboshea@outlook.com>

Fri 3/20/2020 5:06 PM

To: Erin Songer < Esonger@compassmarketinginc.net>

Cc: John White <jwhite@compassmarketinginc.net>; Julie Boshea <Julie@naglelawfirm.com>

Hi Erin

Can you please release my 401K for roll over to my new company. The paperwork is filled with Principal Group and ready to rollover. Please confirm. Thank You

Dave

Sent from Mail for Windows 10

From: J Boshea

Sent: Monday, March 16, 2020 11:42 AM To: esonger@compassmarketinginc.net

Cc: jwhite@compassmarketinginc.net; Julie Boshea

Subject: follow up on separation

Hi Erin,

Hope your well. Haven't heard back from you and we have not received anything. Please keep us posted. Thank You.

Best Dave

Erin,

Hope your well. In follow up I wanted to follow up on my Compass exit payments :

- Accrued vacation minimum 6 weeks \$ 22,500 minimum
- Accrued Personal Days.... 10 Days \$7,500
- Severance 2 weeks \$7,500
- Expenses owed \$11,500
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Due to the suddensence of my termination please pay these funds direct deposit 3/16/2020. Thank You . Best.

Dave

Sent from Mail for Windows 10

#### FW: Dave Boshea Employment Terms

J Boshea <jlboshea@outlook.com>

Fri 5/29/2020 3:27 PM

To: John White <jwhite@compassmarketinginc.net>

Sent from Mail for Windows 10

From: Rebecca Obarski <robarski@naglelawfirm.com>

Sent: Thursday, March 5, 2020 12:48:18 PM

To: jwhite@compassmarketinginc.net < jwhite@compassmarketinginc.net >

**Subject:** Dave Boshea Employment Terms

John,

As you know, I am an attorney in Naperville, Illinois and a friend of Dave and Julie Boshea.

Yesterday afternoon I met with Dave regarding the termination of his employment by Compass Marketing and am representing him in this matter. If you are represented by an attorney in this matter please forward this message to him or her and ask them to contact me, it would not be appropriate for me to communicate directly with you if Compass is represented.

In addition to being surprised by the abruptness of the decision, it was disturbing that Dave was given the standard Severance Agreement rather than the terms of the Agreement Relating to Employment and Post-Employment Competition that you and he negotiated in 2007. By the terms of that agreement Dave is entitled to a severance payment of \$540,000 and if paid he would be obligated to the restrictive covenants in the agreement. It is unfortunate that Dave has not been able to locate a signed copy of that agreement. We believe it must be in his personnel file (and we have requested a copy of that file from Erin Songer).

I understand that Compass may be in need of reorganization, but I would expect that it would honor its contracts.

appreciate your prompt attention to this matter. If I do not hear back from you by noon tomorrow, Friday, March 6, 2020, I will advise Dave that Compass is not honoring the 2007 employment terms and that he should proceed accordingly.

Regards, Rebecca

Rebecca Boyd-Obarski Nagle, Obarski & Holzhauer P.C. 222 S. Mill St., Suite 200 Naperville, IL 60540 630-355-8100 630-355-8185 (fax)

> Please note our new name (formerly Nagle Obarski P.C.) and our new email address domain: naglelawfirm.com.

This e-mail transmission contains information from Nagle, Obarski & Holzhauer P.C. that may be confidential or privileged. If you are not the intended recipient, please be aware that any disclosure, copying, distribution or use of this message, its contents, or any attachments is prohibited. Any wrongful in CAMCAGO of this message is punishable as a federal cGMO1F3you

#### 7/15/2021

Case 1:21-cv-00309-ELH Document 113-15 White Out 109/31/22 Page 137 of 231

have received this message in error, please contact us immediately by telephone (630.355.8100), by fax (630.355.8185) or by electronic mail to Julie@naglelawfirm.com. This communication is believed to be free of any virus or other defect that might negatively affect any computer system which receives and opens it, no responsibility is accepted by the sender or Nagle, Obarski & Holzhauer P.C. for any loss or damage arising in any way if such a virus or defect exists. The recipient has full responsibility to ensure that the communication is virus or defect free.

> CM 0124 CM 0124

#### loser

J Boshea <jlboshea@outlook.com>

Thu 6/11/2020 6:31 PM

To: John White <jwhite@compassmarketinginc.net>

Cc: jcain@compassmarketing.net < jcain@compassmarketing.net>

John

I don't even know where to begin. I was sad for you now I just think you're a bad person I thought I knew. You have a bad rep out there. I seriously wish now you the worst of luck. I know you have no faith but you will have to deal with that. You lie and you are just a bad human.

Jerry, you are right behind john who is so low IQ I didn't realize it but you do. Jerry I am disappointed in you. Never have I seen you close a sale. Someday if you are Christian you may understand.

John, you think you are smart and everyone thinks your dumb and evil. Wow did you use me. You are a drunk and a molester.... my girls who you pretended to love think your creep. Were you this way always or did you get sick at some point.

Best

Dave

Sent from Mail for Windows 10

### (No subject)

J Boshea <jlboshea@outlook.com>
Sat 8/1/2020 12:45 PM
To: John White <jwhite@compassmarketinginc.net>
Hey you . hope your well! and getting help. I miss John

Sent from Mail for Windows 10

#### FW: Dave Boshea Employment Terms

J Boshea <jlboshea@outlook.com>

Tue 8/11/2020 12:24 PM

To: John White <jwhite@compassmarketinginc.net>

Hi

I got your text on the \$750 K . Not sure you ever received this note from Rebecca because there was no response. Heck I would be happy with just the \$540K you offered me and we executed a agreement on when I joined up. Forget the other funds owed to me. .... Ill send you that email with total.

Hope your good. We are good and selling our house - big deal (3).

Thanks John.

Dave

Sent from Mail for Windows 10

From: Rebecca Obarski

Sent: Thursday, March 5, 2020 12:48 PM
To: jwhite@compassmarketinginc.net
Subject: Dave Boshea Employment Terms

John,

As you know, I am an attorney in Naperville, Illinois and a friend of Dave and Julie Boshea.

Yesterday afternoon I met with Dave regarding the termination of his employment by Compass Marketing and am representing him in this matter. If you are represented by an attorney in this matter please forward this message to him or her and ask them to contact me, it would not be appropriate for me to communicate directly with you if Compass is represented.

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Regards, Rebecca

Rebecca Boyd-Obarski Nagle, Obarski & Holzhauer P.C. 222 S. Mill St., Suite 200 Naperville, IL 60540 630-355-8100 630-355-8185 (fax)

M 0127 CM 0127

Case 1:21-cv-00309-ELH Document Mail 3-15 White Off 31/22 Page 141 of 231 Please note our new name (formerly Nagle Obarski P.C.) and our new email address domain: naglelawfirm.com.

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CM 0128 CM 0128

#### FW: Compass Seperation

#### J Boshea <jlboshea@outlook.com>

Tue 8/11/2020 12:30 PM

To: John White <jwhite@compassmarketinginc.net>

4 attachments (436 KB)

doc20200313165414[194].pdf; doc20200313165422[195].pdf; doc20200313165428[196].pdf; doc20200313165435[197].pdf;

#### Sent from Mail for Windows 10

From: J Boshea

Sent: Tuesday, May 26, 2020 12:23 PM To: jwhite@compassmarketinginc.net Subject: FW: Compass Seperation

John,

Hope your doing great. I get that things change and move on . We put a separation agreement in place to handle this sort of thing ..... only \$540 K . Just asking please that this agreement is honored. Forget all the verbal financial commitments made through the many years since we started Compass 3 . Im just looking for fairness and just that the separation agreement (\$540 K) paid. Thanks John. Look forward to seeing you someday 🖾 .

Best Dave

Sent from Mail for Windows 10

From: J Boshea

Sent: Friday, March 13, 2020 6:05 PM To: esonger@compassmarketinginc.net

Cc: Julie Boshea

Subject: RE: Compass Seperation

Hi Erin,

Please let me know. Also, please see attached back up. Thank you. Have a great weekend.

Dave

Sent from Mail for Windows 10

From: J Boshea

Sent: Thursday, March 12, 2020 5:25 PM To: esonger@compassmarketinginc.net

Cc: jlboshea@outlook.com

Subject: RE: Compass Seperation

Hi,

With everything going on wanted to follow up . Please let me know.

Thank You

Dave

CM 0129

#### Sent from Mail for Windows 10

From: J Boshea

Sent: Thursday, March 12, 2020 3:33 AM To: esonger@compassmarketinginc.net

Subject: Compass Seperation

Erin,

Hope your well. In follow up I wanted to follow up on my Compass exit payments :

- Accrued vacation minimum 6 weeks \$ 22,500 minimum
- Accrued Personal Days.... 10 Days \$7,500
- Severance 2 weeks \$7,500
- Expenses owed \$11,500
- Payment through last day of employment \$2,250
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Due to the suddensence of my termination please pay these funds direct deposit 3/16/2020. Thank You . Best, Dave

Sent from Mail for Windows 10



David Boshea 2007 4839 Clearwater LN. Naperville, IL. 60564

May 16,

Dear Dave,

This letter will confirm our preliminary offer for you to consider employment at Compass Marketing. To assume the position of Sr. Account Executive, we will offer you a salary of \$180,000 per year. Additionally, an undefined bonus based on corporate and personal performance will be possible each year. Additionally, we will include health insurance, a \$500 car allowance, 401k, home office expense, lap top, copy machine, and reimbursement of all business related travel. You will be granted two weeks vacation in 2007, and three weeks in 2008.

In exchange for your execution of our company non-compete and non-disclosures we will offer an "involuntary exit package" of 3 times your salary (1 year will be immediately vested, with the additional 2 years accrued over the next three years). This will cover any involuntary termination from the company, other then for cause.

Additionally, 100 percent of your business related membership fees at White Eagle Golf Course will be reimbursed for a total of \$32,000 over three years (\$12,000 up front, and \$10,000 each December. Proper expense documentation will of course be required for each reimbursement.

Upon acceptance of this letter of intent, I will send you a full employment agreement for your consideration. Call me with any questions.

Best Regards

612 3<sup>rd</sup> Street, Suite 200, Annapolis, MD 21403; (410) 268-0030; Fax 301-542-0196 Jwhite@compassmarketinginc.com

CM 0131 CM 0131



John White Chairman/CEO Compass Marketing Inc. Subj: Re: 4-1 follow

Date: 4/1/2007 7:30:58 P.M. Central Standard Time

From: jwhite@compassmarketinginc.com

To: Golf4me36@aol.com

#### Dave.

I know you very very well, and have been waiting a long time to be able to work beside you again. I miss all the years of both fun and getting big things done. From working with Larry/Marty, to McCready, to Sam...

I can't wait to do this, think we will have a ton of fun and make lots of money! I agree they should work under you, but you should be certain they are on board with that. I'd be most worried about Jim or Arnie but you will have to measure that.

Also, you and I need to make sure we discuss an exit plan for you, even seperate from me selling Compass. We need to respect that we are friends and that working together could possibly hurt our relationship (has not happened before but I was always working for youlf!!). I just want to define expectations up front so we limit the chances of getting on two different tracks, but I want us both to agree how we can splt If we need to so we can be certain to save our freindship.

Lets you and I plan on spending some time together. Dan may be coming out with me on Sunday (just for the night) if you want to meet or discuss anything with him. I can handle it and we now have a full timne general counsel so they can writye it all up to protect you and to clarify everything. I'll be real careful to both protect our friendship, and your family. Again, you may want to start part time until you feel secure on the revenue side:

Lets diuscuss this weekend. Can't wait to get started! John

p.s. I want to see pictures of the vacation!

John White Chairman/CEO Compass Marketing Inc. http://www.compassmarketinginc.com

---- Original Message ----From: Golf4me36@aol.com

To: jwhite@compassmarketinginc.com Sent: Sunday, April 01, 2007 7:02 PM

Subject: 4-1 follow

JW:

Hope all is great.

I left you a v-message today. I feel like I am caught up on things. Let me know when you are in Chicago and I will set things up.....we leave Friday for Easter in MI. and back on Sunday night.

f agree on your two points....

- 1) You / you and me need to meet with Arne and get him sized up and fied into the structure professionally.
- 2) Yes, we need to set me up separately from Jim / Ed. They really didn't know where to start on their proposal and figured that they would report to me and I would be worked into what sales they bring in....it was just a starting point in this process. I was pushing them to keep moving forward and get something to you like you wanted. I do think they should report to me but that is up to you.

Let's try to talk tomorrow. I would like to get your thoughts and direction on everything. You know me well...I have been doing a lot of thinking and worrying. I am positive and excited about everything.

Best.

DB

4 Julhite Convo 9-16-2015 Fe: Felory reductions 4 Effective 10-15-15 \* ME: \$ 200K -> \$ 180K + JW 10 bring mine back to # 200Kin Dock par Via Bonds.

Dock par Via Bonds.

Dock par WEGC

ound Sola total ound

sola John total ones.

Mr. He pay in Son 2014.

CM 0134 CM 0134

12/4/2019

Compass: MARKETING

Dave Boshea <dboshea@compassmarketinginc.com>

### Follow up

1 message

David Boshea <dboshea@compassmarketinginc.com>
To: jwhite@compassmarketinginc.net
Co: dboshea@compassmarketinginc.net

Fri, Sep 27, 2019 at 12:23 PM

John,

With everything going on wanted to touch on few important things ...

• my monthly check for Wego which we had in place just Isn't happening . Please send me check for \$11,500 to square me up and I can close it . Done with it.

I let my Ashley go but she is owed \$1,500. We need to pay this and be done.

· I'm sure your not aware but Mike never reinstated my salary after it was cut (\$20K) 4 years ago . Total is \$80K and salary needs to be fixed like we agreed . Wow time has passed and this has seriously added up . It will help greatly I

This has been bouncing around and very important. Thanks for cleaning things up!

Thanks.

David J Boshea , Jr Executive Vice President Powershelf , Compass Marketing 443-758-5504

## (No subject)

J Boshea <jlboshea@outlook.com>

Thu 10/22/2020 3:03 PM

To: John White <jwhite@compassmarketinginc.net>

John , hope your well . So are you just not honoring things and paying me the \$750 K I'm owed / you committed to ?? Hope you do the right thing .

Dave

David J Boshea, Jr **Executive Vice President** 443-758-5504

## (No subject)

J Boshea <jlboshea@outlook.com>

Mon 12/7/2020 11:29 PM

To: John White <jwhite@compassmarketinginc.net>

Hey buddy . just saying hi ,. Also please keep this quite jules and I are divorcing . very hard on me . I now have lawyers and my pastor involved . my heart is broke sorry

David J. Boshea, Jr Executive Vice President DJB Associates LLC 443-758-5504 jlboshea@outlook.com

Date Due Page

9828921939 615796356-00001 05/17/19 147 of 214

## Detail for Dave Boshea: 443-758-5504

## Voice, continued

Date	Tline	Number	Rate	Usage Type	Origination	Destination	Min.	Airtime Chrgs	LD/Other Chrgs	Total
4/02	9:53	P 301-481-5986	Off-Peak	N&W	Naperville IL	Leonardtn MD	33			
4/02	10:26	P 301-481-1609	Off-Peak	N&W	Naperville IL	Leonardtn MD	15			
4/03	9:03/	A 630-301-8591	Peak	PlanAllow	Naperville IL	Aurora IL	4			
4/03	9:44	A 301-481-1609	Peak	M2MAlfow	Naperville IL	VM Deposit CL	1			
4/03	9:47/	A 630-865-7070	Peak	PlanAllow	Naperville IL	VM Deposit CL	1			
4/03	9:49/	301-481-1609	Peak	M2MAllow	Naperville IL	VM Deposit CL	1			
4/03	9:50/	469-877-9491	Peak	PlanAilow	Naperville IL	Grandprart TX	1			
4/03	9:52	469-877-9491	Peak	PlanAllow	Naperville IL	Incoming CL	18			
4/03	10:10/	732-309-8713	Peak	M2MAllow	Naperville IL	Newbrnswck NJ	2			
4/03	10:12/	4147120668	Peak	M2MAllow	Napsrville IL	Milwaukee Wi	28			
4/03	10:40/	240-298-1956	Peak	M2MAllow	Naperville IL	Leonardtn MD	1			
4/03	10:42	630-301-2312	Peak	M2MAllow	Naperville IL	Aurora IL	15			
4/03	10:56	240-298-1956	Peak	M2MAllow	Naperville IL	Leonardin MD	11			
4/03	11:08/	630-301-8591	Peak	PlanAllow	Naperville IL.	Aurora IL	3			
4/03	11:11A	301-481-1609	Peak	M2MAllow	Naperville IL	Leonardtn MD	1			
4/03	11:13A	630-926-2637	Peak	PlanAllow	Naperville IL	LA Granga IL	1			
4/03	11:13A	630-865-7070	Peak	PlanAtlow	Naperville IL	LA Grange IL	101			
4/03	12:55P	630-926-2637	Peak	PłanAllow	Naperville IL	LA Grange IL	2			
4/03	12:57P	630-926-2637	Peak	PlanAllow	Naperville IL	LA Grange IL	1	<u></u>		
4/03	12:57P	630-926-2637	Peak	PlanAlfow	Naperville IL	LA Granga IL	18			
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4/03	1:33P	301-481-1609	Peak	M2MAllow	Naperville IL	Leonardtn MD	16			
4/03	1:51P	240-298-8156	Peak	M2MAllow	Naperville IL	VM Deposit CL	1			
4/03	1:52P	301-481-5986	Peak	M2MAllow	Naperville IL	VM Deposit CL	1			
4/03	1:54P	4102680030	Peak	PlanAllow	Naperville IL	Annapolis MD	1			
4/03	1: <b>55P</b>	410-268-0030	Peak	PlanAllow	Naperville IL	Annapolis MD	1			
4/03	1:58P	952-836-4782	Peak	PlanAllow	Naperville IL	Twincities MN	13		-	
4/03	2:13P	6172753020	Peak	PlanAllow	Naperville IL	Boston MA	19			
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4/03	4:10P	2402981956	Peak I	M2MAllow	Naperville IL	Leonardtn MD	3			
4/03	4:12P	248-330-8298	Peak F	PlanAllow	Naperville IL	Pontiac MI				
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4/03	4:14P	630-301-8591	Peak P	lan Allow	Naperville IL	Aurora IL	1			
4/03	4:15P	630-926-2637	Peak P	lanAllow	Naperville IL	LA Grange IL	36			
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4/03	5:23P	301-481-5986	Peak N	12MAllow	Naperville iL	Leonardtn MD	22			
4/03	5;45P	240-298-1956	Peak M	12MAllow	Naperville IL	Leonardtn MD	1			
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4/03	5:50P	630-301-2312	Peak M	I2MAllow	Naperville IL	Aurora IL	1			
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CM 0138 CM 0138

Date Due Page

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615796356-00001 06/17/19 107 of 174

# Detail for Dave Boshea: 443-758-5504

## Voice, continued

Da	ite Tin	ne Number	Rat	te Usage Type	Origination	Destination	Min.	Airtime Chroc	LD/Other Chrgs	T.4
4/	29 4:3	7P 616-558-7964	l Pea	k M2MAIlow	Plainfield IL	Grand Apds MI	29		ED/Other onlys	Total
4/3	9;3	3A 301-481-1609	Pea	k M2MAllow	Naperville IL	Leonardtn MD	21			
4/3	9:5	5A 630-301-2312	Pea	k M2MAllow	Woodridge IL	<del></del>				
4/3	0 2:0	4P 630-301-8591	Pea	k PlanAlfow	Deerfield IL	VM Deposit CL	1		=	
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5/0	1 10:43	9A 240-298-1956	Peal	M2MAllow	Naperville IL	VM Deposit CL	1			
5/0	1 11:36	SA 630-527-3000	Peal	PlanAllow	Naperville IL	Naperville IL	9			
5/0	1 1:38	P 301-481-1609	Peak	M2MAllow	Naperville IL	Leonardtn MD	<u>~_</u>			
5/0	4:56	P 630-388-0606	Peak	PlanAllow	Naperville IL	Naperville IL	3			
5/02	9:09	A 240-298-1956	Peak	M2MAllow	Naperville IL	VM Deposit CL	1			
5/02	9:40	A 240-298-1956	Peak	M2MAilow	Naperville IL	VM Deposit CL	<u>'</u>			
5/02	11:15	A 301-481-5986	Peak	M2MAilow	Naperville IL	Leonardtn MD	1			
5/02	11:17	A 630-301-2312	Peak	M2MAllow	Naperville IL	Aurora IL	20			
5/02	11:49	A 630-904-7979	Peak	PlanAllow	Naperville IL	Naperville IL	2			
5/02	12:24	P 630-301-8591	Peak	PlanAllow	Naperville IL	VM Deposit CL	1			
5/02	12:25	P 630-301-2312	Peak	M2MAllow	Naperville IL	Aurora IL	6	<del></del>		
5/02	12:31	630-301-8591	Peak	PlanAllow	Naperville IL	VM Deposit CL	1			
5/02	12:38	630-301-8591	Peak	PlanAilow	Naperville IL	VM Deposit CL	1			
5/02	12:47	630-301-8591	Peak	PlanAflow	Naperville IL	VM Deposit CL	<u>'</u>	<del></del>		
5/02	12:54	630-301-8591	Peak	PianAllow	Naperville IL	Aurora IL	2			
5/02	2:03P	530-541-5263	Paak	PlanAllow	Naperville IL	Southtahoe CA	8			
5/02	2:07P	630-430-6016	Peak	PlanAllow,CallWait	Naperville IL	Incoming CL	22		<u></u>	
5/02	2:28P	530-541-5263	Peak	PlanAllow	Naperville IL	Southtahoe CA	1	<del></del> -		
5/02	2:45P	530-541-5263	Peak	PlanAllow	Naperville IL	Southtahoe CA	25			
5/02	3:59P	630-301-2312	Peak	M2MAllow	Naperville IL	Aurora II.	9	****		
5/02	6:29P	630-301-8591	Peak	PlanAllow	Naperville IL	Incoming CL	2			
5/02	7:52P	630-301-8591	Peak	PlanAllow	Naperville IL	Aurora IL				
5/03	8:20A	630-301-2312	Peak	M2MAllow	Naperville IL	Aurora IL	1 1			
5/03	8:46A	630-301-8591	Peak	PlanAllow	Naperville iL	VM Deposit CL	24			
5/03	8:50A	630-301-8591	Peak	PlanAllow	Naperville #L	Incoming CL	1			
5/03	8:59A	267-930-4000	Peak	PlanAllow	Naperville IL	Phidiphzni PA	4			
5/03	9:30A	267-930-4000	Peak	PlanAllow	Naperville IL	Phidiphzn1 PA	8			
5/03	10;14A	617-275-3020	Peak	PlanAllow	Naperville II.	VM Deposit CL	29	_ <del></del>		
5/03	12;14P	708-563-0200	Paak	PlanAilow	Naperville IL					
5/03	1:41P	6304282310	Peak	PlanAflow	Naperville IL	Summit IL	9			
5/03	2:59P	630-301-8591	Peak	PlanAllow	Naperville IL	Naperville IL	2			
5/03	3:17P	630-301-8591	Peak	PlanAllow	Napervillo IL	VM Deposit CL	1			<del></del>
5/03	3:50P	630-301-2312	Peak	M2MAllow	Naperville IL	Incoming CL	2			<del></del>
5/03	4:34P	630-301-8591	Peak	PlanAllow	Naperville IL	Aurora IL	13			
5/03	5;58P	630-301-8591	Peak	PlanAllow	<del></del>	VM Deposit CL	1			
5/04	10:07A	800-338-5960	Off-Peak		Naperville IL	Incoming CL	1			
					Naperville IL	Toll-Free CL	3			

CM 0139 CM 0139

Date Due Page

9830899031

615796356-00001 06/17/19 108 of 174

# Detail for Dave Boshea: 443-758-5504

## Voice, continued

Da	te Tin	ne Number	Rat	e Usage Type	Originati	on Destination	Min.	Airtime Chron	LD/Other Chrgs	7-4-1
5/0	4 10:1	1A 800-792-0001	Off-Pe	ak N&W	Naperville		2		ED/Outer Chrgs	Total
5/0	411:4	1A 630-301-8591	OffPe	eak N&W	Naperville	100 1100 02				
5/0	4 12:3	4P 630-301-8591	OffPe	ak N&W	Naperville		1			
5/0	5 3:2	2P 630-428-2310	Off-Pe	ak N&W	Naperville		4		= _	
5/0	6 8:5	6A 630-301-2312	Peak	M2MAllow	Naperville		8			
5/0	6 11:4	9A 877-290-9580	Peak	PlanAflow	Naperville		12			_=
5/0	2:5	7P 267-930-4000	Peak	PiaлAllow	Naperville	<del></del>	32			
5/0	5:42	2P 630~301~8591	Peak	PlanAllow	Naperville	IL Incoming CL	1			
5/0	6:00	P 800-992-3522	Peak	PlanAllow	Naperville		25			
5/07			Peak	M2MAllow	Oakbrook <sup>-</sup>	T.L. Leonardto MD	21		,	_ =
5/07		A 630-301-2312	Peak	M2MAllow	Deerfield IL	Incoming CL	1			
5/07		P 630-301-2312	Peak	M2MAllow	Naperville	L Incoming CL	4			
5/07			Peak	PlanAllow	Naperville I	L. VM Deposit CL	1			
5/07 —			Peak	PlanAllow	Naperville I	L VM Deposit CL	1			
5/07	5:52		Peak	M2MAllow	Naperville I	L incoming CL	11			
5/07	6:10		Peak	PlanAllow	Naperville I	L VM Deposit CL	1			
5/07	6:14		Peak	PlanAllow	Naperville II	L Aurora IL	3			
5/07	7:331		Peak	M2MAllow	Naperville II	Leonardtn MD	16			<del></del>
5/08	4:29		Peak	M2MAllow	Naperville II	- Autora IL	22			
5/08	4:50F		Peak	M2MAllow	Naperville II	Leonardtn MD	1			
5/08	4:51F		Peak	PlanAllow	Naperville IL	VM Deposit CL	1			
5/08	6:10P		Peak	PlanAllow	Naperville (L	VM Deposit CL	1			
5/08	6:16P		Peak	PlanAllow	Naperville IL	VM Deposit CL	1			
5/08	6:26P	6303018591	Peak	PlanAllow	Naperville IL	VM Deposit CL	1			
5/09	9:57A		Peak	PlanAllow	Naperviile  L	Phidiphzn 1 PA	46			
5/09	10:43A	<del> </del>	Peak	M2MAllow	Napervillo IL	Aurora II.	17			
5/09	11:29A		Peak	PlanAllow	Naperville II.	Naperville IL	3			
5/09	3:46P	630-637-1111	Peak	Pian Allow	Naperville IL	Naperville IL	3			
5/09	7:37P	630-301-8591	Peak	PlanAllow	Naperville IL	Aurora II.	2			
5/10	7:53A	513-300-7848	Peak	M2MAHow	Naperville IL	Cincinnati OH	40			
5/10	10:15A	301-481-5996	Peak	M2MAllow	Naperville (L	Leonardtn MD	1			
5/10	5:57P	630-809-1112	Peak	PlanAllow	Naperville IL	Aurora (L	1			
5/10	5:58P	630-301-8591	Paak	PlanAlfow	Naperville IL	VM Deposit CL	1			
5/10	6:01P	630-301-8591	Peak	PlanAllow	Naperville IL	VM Deposit CL	1			
5/10	6:13P	630-301-8591	Peak	PlanAlfow	Naperville IL	VM Deposit CL	1			
5/10	6:51P	630-420-8801	Peak	PlanAllow	Naperville IL.	Naperville (L	4			
5/10	7:30P	630-301-8591		PlanAlfow	Naperville IL	Aurora IL	f			
5/11	3;25P	630-301-8591	Off-Peak		Naperville IL	Aurora II.	1			
5/13	10:46A	630-301-2312		M2MAllow	Naperville (L	Incoming CL	22			
5/13 5/13	1;55P 2:48P	952-836-4782		PlanAllow	Nepervilla IL	Incoming CL	11			
		630-301-8591		PlanAllow	Naparville IL	incoming CL	1			
5/14 5/14	12:57P	800-338-5960		PlanAllow	Naperville iL	Toll-Free CL	3			
5/14	1:01P	800-792-0001		PlanAllow	Naperville IL	Toll-Free CL	5			
	3:59P	267-930-4000		PlanAllow	Naperville IL	Phidiphzn1 PA	30			
5/14 5/14	4:30P 4:32P	513-300-7848		M2MAllow	Naperville IL	Cincinnati OH	2			
37 14	7.321	630-301-2312	Peak (	M2MAllow	Naperville IL	Aurora IL	1			

CM 0140 CM 0140

Date Due Page

9830899031

615796356-00001 06/17/19 109 of 174

# Detail for Dave Boshea: 443-758-5504

## Voice, continued

Dat	e Tim	e Number	Pate	Usage Type	Origination	Destination	Min	Rindings Ob.	- ID/04	
5/14	4 5:04	IP 630-301-2312	Peak	M2MAllow	Naperville IL	<del></del>	Min.	All time thrg	s LD/Other Chrgs	Total
5/14	4 5:06	iP 630-301-2312	Peak	·	Naperville IL	Aurora II. Aurora IL	1			_ =
5/14	5:07	P 630-301-2312	Peak		Naperville IL	Incoming CL	1			
5/14	4 6:13	P 630-301-8591	Peak	PlanAilow	Naperville (L	Aurora II.	10			
5/15	5 3:14	P 630-388-0606	Peak	PlanAllow	Naperville IL	Naperville IL	2			
5/15	3:41	P 630-301-8591	Peak	PlanAllow	Naperville IL.	Aurora  L	2			_ ==
5/15	5:49	P 518-463-0666	Peak	PlanAllow	Naperville IL	Albany NY	2			
5/15	5:51.	P 630-301-8591	Peak	PlanAllow	Naperville IL	Aurora IL	4			
5/15	6:44	P 517-231-4148	Peak	PlanAllow	Naperville IL	Charlotte MI				_ =
5/15	7:14	518-463-0666	Peak	PlanAllow	Naperville IL	Albany NY	21 46			
5/15	8:19	847-722-6255	Peak	PlanAllow	Naperville IL	Northbrook IL	12			
5/16	9:45/	4 630-388-0606	Peak	PlanAllow	Hillside IL	Incoming CL	12			
5/16	2:08	630-301-8591	Peak	PlanAllow	Lisie IL	VM Deposit CL	<u>-</u>			
5/16	2:12F	630-301-8591	Peak	PlanAllow	Naperville iL	Incoming CL	4		- Andrews	
5/16	5:57F	630-301-8591	Peak	PlanAllow	Naperville IL	Aurora  L	2			
5/16	8:36P	301-4811609	Peak	M2MAllow	Naperville (L.	Leonardin MD	<u>²</u>			
5/17	9.18/	301-4811609	Peak	M2MAllow	Naperville (L	VM Deposit CL	1			
5/17	9:25A	301-481-1609	Peak	M2MAllow	Naperville IL	VM Deposit CL.	1			
5/17	9:27A	301-481-1609	Peak	M2MAilow	Naperville (L	Incoming CL	69			
5/17	11:24A	630-301-2312	Peak	M2MAllow	Naperville IL	Aurora IL	1			
5/17	11:25A	513-300-7848	Peak	M2MAllow	Naperviile IL	Cincinnati OH				
5/17	11.37A	630-301-2312	Peak	M2MAllow	Naperville IL	incoming CL	10			
5/17	11:54A	301-481-5986	Peak	M2MAllow	Naperville IL	Leonardtn MD	1			
5/17	12:16P	513-300-7848	Peak	M2MAllow	Naperville IL	Cincinnati OH	<del>- '</del>			
5/17	12:32P	810-623-9395	Peak	M2MAllow	Naperville IL	Brighton Mf	17			
5/17	12:48P	513-300-7848	Peak	M2MAllow	Naperville iL	Cincinnati OH	29			
5/17	8:35P	301-481-1609	Peak	M2MAllow	Bolingbroo (L	Leonardin MD	60			
5/17	9:38P	240-298-1956	Off-Peak	N&W	Bolingbroo IL	Leonardtn MD	1		<del></del>	=
5/17	9:38P	630-926-2637	OffPeak	N&W	Bolingbroo IL	LA Grange IL				
5/17	9:39P	810-623-9395	Off-Peak	N&W	Bolingbroo IL	Brighton Mi	21			
5/17	10:05P	2402981956	Off-Peak	N&W	Bolingbroo IL	Leonardin MD	1			
5/17	10:06P	2402981956	OffPeak	N&W	Bolingbroo IL	Leonardtn MD				
5/17	10:08P	240-298-1956	Off-Peak	N&W	Bolingbroo IL	Leonardtn MD	<u>-</u>			
5/17	10:11P	240-298-1956	Off-Peak	N&W	Bolingbroo IL	Leonardtn MD	11			
5/17	10:29P	810-623-9395	Off-Peak	N&W	Bolingbroo IL	Brighton MI	1			
5/17	10:46P	240-298-1956	Off-Peak	N&W	Bolingbroo IL	Leonardtn MD	1			
5/17	10:50P	317-617-0436	OffPeak	N&W	Plainfleid IL	Indianapis IN	1			
5/17	10:51P	317-617-0436	Off-Peak	N&W	Naperville IL	Indianapis IN	<u>·</u> 1			
5/17	10:58P	240-298-1956	Off-Peak	V&W	Naperville IL	Leonardtn MD	5			
5/18	11:20A	630-301-8591	OffPeak I	V&W	Naperville IL	VM Deposit CL	1			
5/18	11:22A	630-301-8591	Off-Peak I	₩.W	Naperville IL	VM Deposit CL	1			
5/18	11:28A	630-301-8591	Off-Peak	v&W	Naperville IL	VM Deposit CL	1			
5/18	11:29A	6303018591	Off-Peak N	I&W	Naperville IL	VM Deposit CL	1			
5/18	11:33A	630-301-8591	Off-Peak N	I&W	Naperville iL	VM Deposit CL	1			
5/18	11:34A	630-301-8591	Off-Peak N	&W	Naperville IL	VM Deposit CL	<u>-</u> '			
5/18 1	11:46A	630-301-8591	Off-Peak N	l&W	Naperville IL	VM Deposit CL	<del>-</del> -		- <del>-</del>	
							<u> </u>			

CM 0141 CM 0141

Date Due Page

9838862571

615796356-00001 10/17/19 83 of 150

# Detail for Dave Boshea: 443-758-5504

## Voice, continued

						•				
Da —	ite Tir	ne Number	Rate	e Usage Type	Origination	Destination	Min.	Airtime Chrg	s LD/Other Chrgs	Total
8/3		45P 630-430-6016	Off–Pe	eak N&W	Naperville IL	VM Deposit CL	1			
8/3			OffP€	ak N&W	Naperville IL	VM Deposit CL	1			
8/3			OffPe	ak N&W	Plainfield IL	Aurora iL	1			
8/3			Off-Pe	ak N&W	Naperville IL	Aurora IL	1			
8/3		7P 630-301-8591	Off-Pe	ak N&W	Naperville IL	VM Deposit CL	1			
8/3	1 5:0	9P 630-301-8591	OffPe	ak N&W	Naperville IL	VM Deposit CL	1			
8/3		4P 630-301-8591	Off-Pe	ak N&W	Naperville IL	VM Deposit CL	1		- <u> </u>	
8/3	1 6:3		Off-Pe	ak N&W	Naperville IL	Naperville IL	2			
9/0		7P 517-230-5158	Off-Pe	ak N&W	Naperville (L	Lansing Mf	4			
9/0		4P 517-230-5158	OffPe	ik N&W	Naperville IL	Incoming CL	11			
9/0	1 10:0	OP 517-230-5158	Off-Pea	ık N&W	Naperville II.	VM Deposit CL	1			
9/0	10;0	1P 517-230-5158	Off-Pea	k N&W,ConfCall	Naperville (L.	incoming CL	102			
9/01	11:4	1P 616-558-7964	Off-Pea	k N&W,ConfCall	Naperville IL	Grand Rpds MI	2			
9/01	11:43	3P 517-230-5158	Off-Pea	k N&W	Naperville IL	Lansing MI	6			
9/01	11:49	5P 6165587964	Off-Pea	k N&W	Naperville IL	Grand Rpds Mi	1			
9/01	11:47	7P 616-558-7964	OffPea	k N&W,ConfCall	Naperville IL	Grand Rpds Mi	1		<del></del>	
9/01	11:48	8P 616-558-7964	Off-Pea	k N&W	Naperville IL	Grand Rods MI	1			
9/01	11:49	P 5172305158	Off-Pea	k N&W	Naperville IL	Lansing MI	88			
9/02	11:48	A 517-230-5158	Peak	M2MAllow	Naperville IL	Lansing MI	5			
9/02	11:52	A 616-558-7964	Peak	M2MAllow	Naperville IL	Grand Apds MI	8			
9/02	2:51	952-836-4782	Peak	PlanAllow	Naperville IL	VM Deposit CL	1			
9/02	4:00	517-230-5158	Peak	M2MAllow	" Naperville IL	VM Deposit CL	<u>-</u> 1			
9/02	4:01	616-558-7964	Peak	M2MAllow	Naperville IL	Grand Rods MI	1		<del></del>	
9/02	4:23	517-230-5158	Peak	M2MAllow	Naperville IL	VM Deposit CL	1			
9/02	4:23F	616-558-7964	Peak	M2MAllow	Naperville IL	Grand Rpds MI	1			
9/02	5:41P	630-301-8591	Peak	PlanAllow	Naperville IL	Aurora IL	1			
9/02	5:56P	616-634-4670	Peak	M2MAllow	Naperville fL	Grand Rpds Mi	1			
9/02	5:57P	616-634-4670	Peak	M2MAilow	Naperville IL	VM Deposit CL	1			
9/02	5:58P	517-231-4148	Peak	PlanAllow	Naperville IL	VM Deposit CL	1			
9/02	5:59P	248-207-9000	Peak	M2MAllow	Naperville IL	Northville MI	34			
9/02	6:35P	810-623-9395	Peak	M2MAllow	Naperville IL	Brighton MI	1			
9/03	1:05P	630-301-8591	Peak	PfanAlfow	Naperville (L	Incoming CL	2			
9/03	2:02P	630-301-8591	Peak	PlanAllow	Naperville IL	VM Deposit CL	1			
9/03	2:31P	630-301-8591	Peak	PlanAllow	Naperville IL	VM Deposit CL				
9/03	3:06P	630-301-2312	Peak	M2MAllow	Naperville IL	Aurora IL	69			
9/03	4:20P	301-481-1609	Peak	M2MAIlow	Naperville IL	Leonardtn MD	85		<del></del>	
9/03	5:45P	732-241-4366	Peak	M2MAllow	Naperville IL	VM Deposit CL	1			
9/03	5:46P	513-300-7848	Peak	M2MAllow	Naperville IL	VM Deposit CL	1			
9/03	6:02P	2404168474	Peak	M2MAllow	Naperville IL	VM Deposit CL	<u>-</u> -			
9/03	6:03P	732-241-4366	Peak	M2MAllow	Napervilla IL	VM Deposit CL				
9/03	6:23P	630-865-7070	Peak	PlanAllow	Naperville IL	VM Deposit CL	<u>-</u>			
9/03	6:23P	513-300-7848	Peak	M2MAIlow	Naperville IL	VM Deposit CL				
9/03	6:27P	267-987-8716	Peak	M2MAllow	Naperville IL	VM Deposit CL	1			
9/03	6:30P	443-812-5992	Peak	M2MAllow	Naperville IL	VM Deposit CL	1			_
9/03	6:32P	301-481-5986	Peak I	M2MAllow	Naporville IL	VM Deposit CL	1			
9/03	6:33P	240-298-8156	Peak I	M2MAffow	Naperville IL	VM Deposit CL	1			<del></del>
					responsing at	THE DEPOSIT OF	1			

CM 0142 CM 0142

Date Due Page

9851271849

615796356-00001 04/17/20 16 of 20

## Detail for Dave Boshea: 443-758-5504

# Voice, continued

Date	Time	Number	Rate	Usage Type	Origination	Destination	Min.	Airtime Chras	LD/Other Chrgs	T-4-1
3/03	3:006	717-465-5645	Peak	M2MAllow	Naperville (L	VM Deposit CL			coroniei cings	Total
3/03	3:01	630-865-7070	Peak	PlanAllow	Naperville iL	VM Deposit CL	<u>_</u>			
3/03	3:01F	513-300-7848	Peak	M2MAllow	Naperville IL	Cincinnati OH	1			
3/03	3:03F	630-301-8591	Peak	PlanAllow	Naperville II.	Aurora IL	4			
3/03	3:06P	240-298-1956	Peak	M2MAllow	Naperville IL	VM Deposit CL	- <u>·</u>			
3/03	3:09P	2402981956	Peak	M2MAllow	Naperville IL	VM Deposit CL	1			
3/03	3:20P	7174655645	Peak	M2MAllow	Plainfield IL	VM Deposit CL	1			
3/03	3:21P	717-4655645	Peak	M2MAllow	Plainfield IL	VM Deposit CL	1			
3/03	3:22P	301-481-1609	Peak	M2MAllow	Naperville IL	Leonardtn MD	57			
3/03	4:03P	513-300-7848	Peak	M2MAllow,CallWait	Naperville IL	incoming CL	47			
3/03	4:50P	513-300-7848	Peak	M2MAllow	Naperville IL	incoming CL	11			
3/03	5;00P	240-298-1956	Peak	M2MAllow	Naperville IL	Leonardtn MD	1			
3/03	5:01P	240-298-1956	Peak	M2MAllow	Naperville IL	Leonardtn MD	1			
3/03	5:01P	2402981956	Peak	M2MAllow	Naperville IL	Leonardin MD	1			
3/03	5:03P	240-298-1956	Peak	M2MAllow	Naperville ft.	Leonardtn MD	1			
3/03	5:08P	414-712-0668	Peak	M2MAllow	Naperville IL	Milwaukee Wi	1			
3/03	5:10P	301-481-1609	Peak	M2MAllow	Naperville IL	Leonardtn MD	38			
3/03	5:46P	630-399-9304	Peak	M2MAllow	Naperville IL	LA Grange IL	19			
3/03	6:11P	630-399-9304	Peak	M2MAllow	Naperville IL	LA Grange IL	8			
3/04	8:20A	717-465-5645	Peak	M2MAllow	Naperville IL	Hanover PA	1			
3/04	8:36A	517-202-7213	Peak	M2MAllow	Naperville IL	Lansing MI	6			
3/04	12:02P 1:13P	630-865-7070	Peak	PlanAllow	Naperville (L	Incoming CL	1			
3/04	1:31P	630-301-8591	Peak	PlanAllow	Naperville IL	Incoming CL	3	<del></del>		
3/04	1:33P	312-933-9736 312-933-9736	Peak Peak	Plan Allow Plan Allow	Naperville II.	Incoming CL	1	<u></u>		
3/04	8:37P	630-904-4242	Peak	PlanAllow	Naperville IL	Chicago IL	1			
3/04	9;02P	630-865-7070	Off-Peak	·	Naperville II.	Naperville IL	1	<u> </u>		
3/04	9:20P	630-904-4242		N&W,CallWait	Naperville (L.	LA Grange IL	45			
3/05	7:58A	301-481-1609	Peak	M2MAllow	Naperville IL Naperville IL	Incoming CL	1			
3/05	7:59A	301-481-1609	Peak	M2MAllow	Naperville iL	Leonardtn MD				
3/05	8:10A	301-481-1609	Peak	M2MAllow	Naperville IL	Leonardtn MD	1			
3/05	8:16A	301-481-1609	Peak	M2MAllow	Naperville IL	Incoming CL Leonardtn MD	2			
3/05	8:17A	301-481-1609	Peak	M2MAllow	Naperville 1L	Leonardtn MD	1			
3/05	9:38A	301-481-5986	Peak	M2MAllow	Naperville IL	Leonardtn MD	29			
3/05	10:25A	301-481-5986		M2MAllow	Naperville IL	Leonardtn MD	47 15			
3/05	12:09P	301-4811609	Peak	M2MAlfow	Naperville IL	Leonardtn MD	9	<del>_</del>		
1/05	12:18P	630-399-9304	Peak	M2MAllow	Naperville IL	LA Grange IL	18			
/05	12:43P	301-481-1609	Peak	M2MAIlow	Naperville IL	Leonardin MD	23			
/05	12:57P	630-301-8591	Peak	Plan Allow, Call Wait	Naperville IL	Incoming CL	13			
/05	1:44P	630-301-8591	Peak 1	PlanAllow	Naperville IL	VM Daposit CL	1			
/05	1:46P	301-481-1609	Peak	M2MAIlow	Naperville (L	Leonardin MD	30		+	
/05	2:55P	717-465-5645	Peak I	M2MAilow	Naperville IL	Hanover PA	53			
/05	5:18P	855-4179512	Peak f	PlanAllow	Naperville IL	Toll-Free CL	13			
<b>10</b> 5	5:38P	301-481-1609	Peak f	M2MAllow	Naperville IL	Leonardtn MD	1			
05	5;39P	301-4811609	Peak M	//2MAllow	Naperville IL	Leonardtn MD	3		<del></del>	<del></del>
05	6:29P	630-301-8591	Peak F	PlanAllow	Napervillo IL	Incoming CL	3			
					<del> </del>					

CM 0143 CM 0143

Payroll	Regi	ster						Compass N.	larketin y (175583)	Inc Inc			Check Date: Process: Period:	01/02/2013 to 2013010201 12/16/2012 to	to 20201019	Pa 01 29
Boshea Jr,		Code	Earning	Hours	Rate	Amount	Code	Tax	Status	Taxable	Amount	Code	Deduction	Amount	Type	Reg
David J		CA	Car Allowance			250.00	FITW	Federal Income T	M-8	7978.14	1958.56	401K	401K	126.40	Chk Date	01/02/2013
Emp Id	32	KM	401k Match			126.40	IL	Illinois SITW	M-8	7978.14	364.74	AFLPRE	AFLAC - pretax	113.41	Batch	SM1
		R	Regular			8333.33	MED	Medicare		8104.54	117.52		Dental Insurance	29.20		5196.93
							SS	OASDI		8104.54	340.39		HSA		Dir Dep	5196.93
		T-4-1 F		0.00		8583.33	Total Ta				2781.21	M Total Ded	Medical Insuranc	186.18	Chk/Vcr#	0.00
		Total Ea				8583.33								605.19		1008
Boshea Jr,		Code	Earning	Hours	Rate	Amount	Code	Tax	Status	Taxable	Amount	Code	Deduction	Amount	Туре	Reg
David J		CA	Car Allowance			250.00	FITW	Federal Income T	M-8	6771.20	1590.82	401K	401K	666.67	Chk Date	01/16/2013
Emp Id	32	KM	401k Match			206.93		Illinois SITW	M-8	6771.20	304.39		401K	666.67	Batch	SM2
		KM	401k Match			333.33		Medicare		8104.54	117.51		401K Loan	126.40		3967.51
		R	Regular			8333.33	22	OASDI		8104.54	664.57	AFLPRE D	AFLAC - pretax	113.41	V	3967.51
												HSA	Dental Insurance HSA	29.20 150.00	Chk/Vcr#	0.00
												M	Medical Insuranc	186.18	CIIK/VCI #	1098
		Total Ea	rnings	0.00		8583.33	Total Ta	ixes			2677.29	Total Ded		1938.53		
Boshea Jr,		Code	Earning	Hours	Rate	Amount	Code	Tax	Status	Taxable	Amount		Deduction	Amount	Type	Reg
David J		CA	Car Allowance	Hours	Tutte	-500.00	FITW	Federal Income T	faces and a	-459.28	Amount	401K	401K	666.67	Chk Date	02/01/2013
Emp Id	32	HSA	HSA - Employer			2600.00		Illinois SITW	M-8	-459.28		401KL	401K Loan	126.40		SMI
Linp io	32	KM	401k Match			40.00	MED	Medicare	111 0	207.39	3.01	AFLPRE	AFLAC - pretax	113.41		148.45
		R	Regular			1000.00		OASDI		207.39	12.86		Auto Reimbursen	-500.00	Dir Dep	148.45
		70				5575.00		200222		79.77	2000	AUTO	Auto Reimbursen	-250.00	Chk Amt	0.00
												D4	Dental - Fam	29.20	Chk/Vcr#	1196
												HSA	HSA	150.00		
		Total Ea	rnings	0.00		500.00	Total Ta	ixes			15.87	Total Ded	luctions	335.68		
Boshea Jr,		Code	Earning	Hours	Rate	Amount	Code	Tax	Status	Taxable	Amount	Code	Deduction	Amount	Type	Reg
David J		R	Regular			7333.33	FITW	Federal Income T		7333.33	1082.60				Chk Date	02/05/2013
Emp Id	32						IL	Illinois SITW	M-8	7333.33	332.50				Batch	ADJ
							MED	Medicare		7333.33	106.33				Net	5357.23
							SS	OASDI		7333.33	454.67				Dir Dep Chk Amt	5357.23 0.00
		Total Ea	rnings	0.00		7333.33	Total Ta	ixes			1976.10	Total Ded	luctions	0.00	Chk/Vcr#	1290
Boshea Jr,		Code	Earning	Hours	Rate	Amount	Code	Tax	Status	Taxable	Amount	Code	Deduction	Amount	Type	Reg
David J		KM	401k Match			333.33	FITW	Federal Income T	M-8	7507.87	1126.24	401K	401K	666.67	Chk Date	02/15/2013
Emp Id	32	M	Miscellaneous			320.00	IL	Illinois SITW	M-8	7507.87	341.23	401KL	401K Loan	126.40	Batch	SM2
		R	Regular			8333.33	MED	Medicare		8174.54	118.53	AFLPRE	AFLAC - pretax	113.41	Net	5538.65
							SS	OASDI		8174.54	506.82	AUTO	Auto Reimbursen	-250.00	Dir Dep	5538.65
												D4	Dental - Fam	29.20	Chk Amt	0.00
												HSA	HSA	150.00	Chk/Vcr#	1326
												M-PPO4	BluePreferred PP	186.18		
		Total Ea	rnings	0.00		8653.33	Total Ta	ixes			2092.82	Total Ded	uctions	1021.86		

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Payroll	Regi	ster						Compass N.	larketin y (175583)	g Inc			Check Date: Process: Period:	01/02/2013 to 2013010201 12/16/2012 to	to 20201019	01 29
Boshea Jr,		Code	Earning	Hours	Rate	Amount	Code	Tax	Status	Taxable	Amount	Code	Deduction	Amount	Туре	Reg
David J		KM	401k Match			126.40	FITW	Federal Income T	M-8	7854.54	1216.17	401KL	401K Loan	126.40	Chk Date	03/01/2013
Emp Id	32	R	Regular			8333.33	IL	Illinois SITW	M-8	7854.54	358.56	AFLPRE	AFLAC - pretax	113.41	Batch	SM1
							MED	Medicare		7854.54	113.89	AUTO	Auto Reimbursen	-250.00	Net	5802.54
							SS	OASDI		7854.54	486.98		Dental - Fam	29.20	Dir Dep	5802.54
												HSA	HSA	150.00		0.00
				2.22							2177 (0	M-PPO4	BluePreferred PP	186.18	Chk/Vcr#	1428
		Total Ea	rnings	0.00		8333.33	Total Ta	xes			2175.60	Total Ded	uctions	355.19		
Boshea Jr,		Code	Earning	Hours	Rate	Amount	Code	Tax	Status	Taxable	Amount	Code	Deduction	Amount		Reg
David J		R	Regular			350.00	FITW	Federal Income T		350.00					Chk Date	03/01/2013
Emp Id	32						IL	Illinois SITW	M-8	350.00					Batch	SM1
							MED	Medicare		350.00	5.08				Net	323.22
							SS	OASDI		350.00	21.70				Dir Dep	323.22
		Total Ea	rnings	0.00		350.00	Total Ta	xes			26.78	Total Ded	uctions	0.00	Chk/Vcr#	0.00 1429
Boshea Jr,		Code	Earning	Hours	Rate	Amount	Code	Tax	Status	Taxable	Amount	Code	Deduction	Amount	Type	Reg
David J		KM	401k Match	110113	Tunc	-126.40	FITW	Federal Income T		7854.54	1216.17	401KL	401K Loan	126.41	Chk Date	03/15/2013
Emp Id	32	R	Regular			8333.33		Illinois SITW	M-8	7854.54		AFLPRE	AFLAC - pretax	113.41		SM2
July 10		-	210 Branz				MED	Medicare	-12.0	7854.54	113.89		Auto Reimbursen	-250.00		5802.53
							SS	OASDI		7854.54	486.98		Dental - Fam		Dir Dep	5802.53
												HSA	HSA	150.00	Chk Amt	0.00
												M-PPO4	BluePreferred PP	186.18	Chk/Vcr#	1530
		Total Ea	rnings	0.00		8333.33	Total Ta	xes			2175.60	Total Ded	uctions	355.20		
Boshea Jr,		Code	Earning	Hours	Rate	Amount	Code	Tax	Status	Taxable	Amount	Code	Deduction	Amount	Type	Reg
David J		R	Regular			350.00	FITW	Federal Income T	M-8	350.00	-			-	Chk Date	03/15/2013
Emp Id	32						IL	Illinois SITW	M-8	350.00					Batch	SM2
							MED	Medicare		350.00	5.07				Net	323.23
							SS	OASDI		350.00	21.70				Dir Dep	323.23
		Total Ea	rnings	0.00		350.00	Total Ta	xes			26.77	Total Ded	uctions	0.00	Chk/Vcr#	0.00 1531
Boshea Jr.		Code	Earning	Hours	Rate	Amount	Code	Tax	Status	Taxable	Amount	Code	Deduction	Amount		Reg
David J		R	Regular	110015	Nate	8333.33	FITW	Federal Income T	M-8	7854.54	1216.17	401KL	401K Loan	126.41	Chk Date	04/01/2013
Emp Id	32	14	Regulai			ננ.נננט	IL	Illinois SITW	M-8	7854.54			401K Loan	75.00	Batch	SM1
Linp Iu	34						MED	Medicare	111 0	7854.54	113.90		AFLAC - pretax	113.41		5727.52
							SS	OASDI		7854.54			Auto Reimbursen	-250.00		5727.52
							30			,,,,,,,,	100.50	D4	Dental - Fam	29.20	Chk Amt	0.00
												HSA	HSA		Chk/Vcr#	1637
												M-PPO4	BluePreferred PP	186.18		2007

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Payroll	Regi	ster						Compass N	Iarketin y (175583)	ng Inc			Check Date: Process: Period:	01/02/2013 to 2013010201 12/16/2012 to	to 20201019	01 294
Boshea Jr, David J Emp Id	32	Code KM R	Earning 401k Match Regular	Hours	Rate	Amount 291.66 8333.33	Code FITW IL MED SS	Tax Federal Income T Illinois SITW Medicare OASDI	Status M-8 M-8	Taxable 7521.21 7521.21 7854.54 7854.54	Amount 1129.57 341.89 113.89 486.98	Code 401K 401KL 401KL AFLPRE AUTO D4 HSA M-PPO4	Deduction 401K 401K Loan 401K Loan AFLAC - pretax Auto Reimbursen Dental - Fam HSA BluePreferred PP	Amount 333.33 126.41 75.00 113.41 -250.00 29.20 150.00 186.18	Chk Date Batch Net Dir Dep Chk Amt	Reg 04/16/2013 SM2 5497.47 5497.47 0.00 1739
		Total Ea	rnings	0.00		8333.33	Total Ta	ixes			2072.33	Total Ded	luctions	763.53		
Boshea Jr,		Code	Earning	Hours	Rate	Amount	Code	Tax	Status	Taxable	Amount	Code	Deduction	Amount	Type	Reg
David J		R	Regular	1.00		700.00	FITW	Federal Income T		700.00		- 9.50			Chk Date	04/16/2013
Emp Id	32						IL	Illinois SITW	M-8	700.00	0.83				Batch	SM2
							MED	Medicare		700.00	10.15				Net	645.62
							SS	OASDI		700.00	43.40				Dir Dep	645.62
		Total Ea	rnings	0.00		700.00	Total Ta	ixes			54.38	Total Ded	luctions	0.00	Chk/Vcr#	0.00 1740
Boshea Jr,		Code	Earning	Hours	Rate	Amount	Code	Tax	Status	Taxable	Amount	Code	Deduction	Amount	Type	Reg
David J		KM	401k Match			291.66	FITW	Federal Income T	The district of the last	7521.21	1129.57	401K	401K	333.33	Chk Date	05/01/2013
Emp Id	32	R	Regular			8333.33	IL	Illinois SITW	M-8	7521.21	341.89	401KL	401K Loan	126.41	Batch	SM1
							MED	Medicare		7854.54	113.89	401KL	401K Loan	75.00	Net	5497.46
							SS	OASDI		7854.54	486.99	AFLPRE	AFLAC - pretax	113.41	Dir Dep	5497.46
												AUTO	Auto Reimbursen	-250.00	Chk Amt	0.00
												D4	Dental - Fam	29.20	Chk/Vcr#	1848
												HSA	HSA	150.00		
		TAIR		0.00		8333.33	Total Ta				2072.34	M-PPO4 Total Ded	BluePreferred PP	186.18 763.53		
		Total Ea	irnings	0.00		8333.33							AT Landson	/03.55		
Boshea Jr,		Code	Earning	Hours	Rate	Amount	Code	Tax	Status	Taxable	Amount	Code	Deduction	Amount	Type	Reg
David J	22	R	Regular			350.00	FITW	Federal Income T		350.00					Chk Date	05/01/2013
Emp Id	32						IL MED	Illinois SITW	M-8	350.00	5.07				Batch	SMI
							SS	Medicare OASDI		350.00 350.00	21.70				Net Dir Dep	323.23
							33	OASDI		330.00	21.70				Chk Amt	323.23 0.00
		Total Ea	rnings	0.00		350.00	Total Ta	ixes			26.77	Total Ded	luctions	0.00	Chk/Ver#	1849
Boshea Jr,		Code	Earning	Hours	Rate	Amount	Code	Tax	Status	Taxable	Amount	Code	Deduction	Amount	Type	Reg
David J		KM	401k Match			291.66	FITW	Federal Income T	M-8	7521.21	1129.57	401K	401K	333.33	Chk Date	05/16/2013
Emp Id	32	R	Regular			8333.33	IL	Illinois SITW	M-8	7521.21	341.89	401KL	401K Loan	126.41	Batch	SM2
							MED	Medicare		7854.54	113.89	401KL	401K Loan	75.00	Net	5497.47
							SS	OASDI		7854.54	486.98	AFLPRE	AFLAC - pretax	113.41	Dir Dep	5497.47
												AUTO	Auto Reimbursen	-250.00		0.00
												D4	Dental - Fam	29.20	Chk/Vcr#	1947
												HSA	HSA	150.00		
							-				1.1 V	M-PPO4	BluePreferred PP	186.18		
		Total Ea	rnings	0.00		8333.33	Total Ta	ixes			2072.33	Total Ded	luctions	763.53		

CM 0146

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Payroll	Regi	ster						Compass N. Compan	larketin y (175583)	g Inc				01/02/2013 to 2013010201 12/16/2012 to	to 20201019	01
oshea Jr,		Code	Earning	Hours	Rate	Amount	Code	Tax	Status	Taxable	Amount	Code	Deduction	Amount	Туре	Reg
avid J		R	Regular			350.00	FITW	Federal Income T	M-8	350.00					Chk Date	05/16/2013
mp Id	32						IL	Illinois SITW	M-8	350.00					Batch	SM2
							MED	Medicare		350.00	5.08				Net	323.22
							SS	OASDI		350.00	21.70				Dir Dep	323.22
		Total Ea	rnings	0.00		350.00	Total Ta	xes			26.78	Total Ded	luctions	0.00	Chk/Vcr#	0.00 1948
shea Jr.		Code	Earning	Hours	Rate	Amount	Code	Tax	Status	Taxable	Amount	Code	Deduction	Amount	Type	Reg
vid J		KM	401k Match	32102		333.33	FITW		M-8	7104.54	1025.41	401K	401K	750.00	Chk Date	06/03/2013
mp Id	32	R	Regular			8333.33	IL	Illinois SITW	M-8	7104.54	321.06		401K Loan	126.41	Batch	SMI
							MED	Medicare		7854.54	113.89	401KL	401K Loan	75.00	Net	5205.79
							SS	OASDI		7854.54	486.98	AFLPRE	AFLAC - pretax	113.41	Dir Dep	5205.79
												AUTO	Auto Reimbursen	-250.00	Chk Amt	0.00
												D4	Dental - Fam	29.20	Chk/Vcr#	2055
												HSA	HSA	150.00		
						1000						M-PPO4	BluePreferred PP	186.18		
		Total Ea	rnings	0.00		8333.33	Total Ta	xes			1947.34	Total Ded	luctions	1180.20		
shea Jr,		Code	Earning	Hours	Rate	Amount	Code	Tax	Status	Taxable	Amount	Code	Deduction	Amount	Type	Re
vid J		R	Regular			350.00	FITW		M-8	350.00					Chk Date	06/03/201
np Id	32						IL	Illinois SITW	M-8	350.00	5.07				Batch	SM
							MED	Medicare		350.00	5.07				Net	323.2
							SS	OASDI		350.00	21.70				Dir Dep Chk Amt	323.2
		Total Ea	rnings	0.00		350.00	Total Ta	xes			26.77	Total Ded	luctions	0.00	Chk/Vcr#	0.0 205
shea Jr,		Code	Earning	Hours	Rate	Amount	Code	Tax	Status	Taxable	Amount	Code	Deduction	Amount	Туре	Reg
vid J		KM	401k Match			333.33	FITW	Federal Income T	M-8	7104.54	1025.41	401K	401K	750.00	Chk Date	06/17/2013
np Id	32	R	Regular			8333.33	IL	Illinois SITW	M-8	7104.54	321.06	401KL	401K Loan	126.41	Batch	SM
							MED	Medicare		7854.54	113.89	401KL	401K Loan	75.00	Net	5205.7
							SS	OASDI		7854.54	486.98	AFLPRE	AFLAC - pretax	113.41	Dir Dep	5205.7
												AUTO	Auto Reimbursen	-250.00	Chk Amt	0.0
												D4	Dental - Fam	29.20	Chk/Vcr#	216
												HSA	HSA	150.00		
				0.00		0000 00	T . 1 T				1045.44	M-PPO4	BluePreferred PP	186.18		
		Total Ea	A trail of a	0.00		8333.33	Total Ta				1947.34	Total Ded		1180.20		
shea Jr,		Code	Earning	Hours	Rate	Amount	Code	Tax	Status	Taxable	Amount	Code	Deduction	Amount		Re
vid J		R	Regular			350.00	FITW		M-8	350.00					Chk Date	06/17/201
np Id	32						IL	Illinois SITW	M-8	350.00					Batch	SM
							MED	Medicare		350.00	5.08				Net	323.2
							SS	OASDI		350.00	21.70				Dir Dep	323.2
		Total Ea		0.00		350.00	Total Ta	and the second			26.78	Total Ded	C-2	0.00	Chk/Vcr#	0.0 216
							lota a									

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CM 0147

10/22/20 01:42 PM

Run Date: Run Time:

Boshea Jr PagM0293

Boshea Jr, David J Emp Id 32							Compan	y (175583)				Process: Period:	2013010201 12/16/2012 to		
anp nt 32	Code KM R	Earning 401k Match Regular	Hours	Rate	Amount 333,33 8333.33	Code FITW IL MED SS	Tax Federal Income T Illinois SITW Medicare OASDI	Status M-8 M-8	Taxable 7104.54 7104.54 7854.54 7854.54	Amount 1025.41 321.06 113.89 486.98	401K 401KL	Deduction 401K 401K Loan 401K Loan AFLAC - pretax Auto Reimbursen Dental - Fam HSA BluePreferred PP	Amount 750.00 126.41 75.00 113.41 -250.00 29.20 150.00 186.18	Chk Date Batch	Reg 07/01/2013 SM1 5205.79 5205.79 0.00 2288
	Total Ear	rnings	0.00		8333.33	Total Ta	ixes			1947.34	Total Ded	luctions	1180.20		
Boshea Jr,	Code	Earning	Hours	Rate	Amount		Tax	Status	Taxable	Amount	Code	Deduction	Amount	Type	Reg
David J Emp Id 32	R	Regular			350.00	FITW IL MED SS	Federal Income T Illinois SITW Medicare OASDI	M-8 M-8	350.00 350.00 350.00 350.00	5.08 21.70				Chk Date Batch Net Dir Dep Chk Amt	07/01/2013 SM1 323.22 323.22 0.00
	Total Ear	rnings	0.00		350.00	Total Ta	ixes			26.78	Total Ded	luctions	0.00	Chk/Vcr#	2289
Boshea Jr,	Code	Earning	Hours	Rate	Amount	Code	Tax	Status	Taxable	Amount	Code	Deduction	Amount	Type	Reg
David J Emp Id 32	KM R	401k Match Regular			333.33 8333.33	FITW IL MED SS	Federal Income T Illinois SITW Medicare OASDI	M-8 M-8	7104.54 7104.54 7854.54 7854.54	1025.41 321.06 113.89 486.98	401K 401KL 401KL AFLPRE AUTO D4 HSA M-PPO4	401K 401K Loan 401K Loan AFLAC - pretax Auto Reimbursen Dental - Fam HSA BluePreferred PP	750.00 126.41 75.00 113.41 -250.00 29.20 150.00 186.18	Dir Dep Chk Amt	07/16/2013 SM2 5205.79 5205.79 0.00 2406
	Total Ear	rnings	0.00		8333.33	Total Ta	ixes			1947.34	Total Ded	luctions	1180.20		
Boshea Jr, David J Emp Id 32	Code R	Earning Regular	Hours	Rate	Amount 360.00	Code FITW IL MED SS	Tax Federal Income T Illinois SITW Medicare OASDI	Status M-8 M-8	Taxable 360.00 360.00 360.00 80.26	5.22 4.98	Code	Deduction	Amount	Type Chk Date Batch Net Dir Dep Chk Amt	Reg 07/16/2013 SM2 349.80 349.80 0.00
	Total Ear	rnings	0.00		360.00	Total Ta	ixes			10.20	Total Ded	luctions	0.00	Chk/Vcr#	2407
Boshea Jr, David J Emp Id 32	Code KM R	Earning 401k Match Regular	Hours	Rate	333.33	FITW	Tax Federal Income T Illinois SITW Medicare OASDI	Status M-8 M-8	Taxable 6937.87 6937.87 7854.54	Amount 983.74 312.73 113.89	Code 401K 401KL 401KL2 AFLPRE AUTO D4 HSA M-PPO4	Deduction  401K  401K Loan  401K Loan #2  AFLAC - pretax  Auto Reimbursen  Dental - Fam  HSA  BluePreferred PP	Amount 916.67 75.00 126.41 113.41 -250.00 29.20 150.00 186.18	Chk Date Batch Net Dir Dep	Reg 08/01/2013 SM1 5576.10 5576.10 0.00 2529

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Employee

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Payroll	Regi	ster						Compass N. Compan	Iarketin y (175583)	g Inc			Check Date: Process: Period:	01/02/2013 to 2013010201 12/16/2012 to	to 20201019	01
oshea Jr,		Code	Earning	Hours	Rate	Amount	Code	Tax	Status	Taxable	Amount	Code	Deduction	Amount	Туре	Reg
avid J	.6.6.	R	Regular			350.00	FITW	Federal Income T	5777	350.00					Chk Date	08/01/2013
mp Id	32						IL	Illinois SITW	M-8	350.00	0.42				Batch	SMI
							MED	Medicare		350.00	5.07				Net	344.93
							SS	OASDI							Dir Dep Chk Amt	344.9
		Total Ea	rnings	0.00		350.00	Total Ta	ixes			5.07	Total Ded	luctions	0.00		253
shea Jr,		Code	Earning	Hours	Rate	Amount	Code	Tax	Status	Taxable	Amount	Code	Deduction	Amount	Type	Re
vid J		KM	401k Match			333.33	FITW	Federal Income T	M-8	6937.87	983.74	401K	401K	916.67	Chk Date	08/16/201
np Id	32	R	Regular			8333.33	IL	Illinois SITW	M-8	6937.87	312.73	401KL	401K Loan	75.00	Batch	SM
							MED	Medicare		7854.54	113.89		AFLAC - pretax	113.41		5702.5
							SS	OASDI				AUTO	Auto Reimbursen	-250.00	Dir Dep	5702.5
												D4 HSA	Dental - Fam HSA	29.20 150.00	Chk/Vcr#	0.0 264
												M-PPO4	BluePreferred PP	186.18	CIR VCI #	204
		Total Ea	rnings	0.00		8333.33	Total Ta	ixes			1410.36	Total Dec		1220.46		
shea Jr,		Code	Earning	Hours	Rate	Amount	Code	Tax	Status	Taxable	Amount	Code	Deduction	Amount	Type	Re
vid J		R	Regular			350.00	FITW	Federal Income T	M-8	350.00					Chk Date	08/16/201
np Id	32						IL	Illinois SITW	M-8	350.00	2.44				Batch	SM
							MED SS	Medicare		350.00	5.08				Net	344.9
							22	OASDI							Dir Dep Chk Amt	344.9
		Total Ea	rnings	0.00		350.00	Total Ta	ixes			5.08	Total Dec	luctions	0.00	Chk/Vcr#	264
shea Jr,		Code	Earning	Hours	Rate	Amount	Code	Tax	Status	Taxable	Amount		Deduction	Amount		Re
vid J	143	KM	401k Match			333.33	FITW	Federal Income T		6937.87	983.74		401K	916.67	Chk Date	08/30/201
np Id	32	R	Regular			8333.33	IL	Illinois SITW	M-8	6937.87	312.73	401KL	401K Loan	75.00		SM
							MED SS	Medicare		7854.54	113.89	401KL2 AFLPRE	401K Loan #2	150.00		5552.5 5552.5
							22	OASDI				ALLINE	AFLAC - pretax Auto Reimbursen	-250.00	Dir Dep Chk Amt	0.0
												D4	Dental - Fam	29.20		275
												HSA	HSA	150.00	Cinc ver a	
												M-PPO4	BluePreferred PP	186.18		
		Total Ea	rnings	0.00		8333.33	Total Ta	ixes			1410.36	Total Dec	luctions	1370.46		
shea Jr,		Code	Earning	Hours	Rate	Amount	Code	Tax	Status	Taxable	Amount	Code	Deduction	Amount	2.4	Re
vid J		R	Regular			350.00	FITW	Federal Income T		350.00					Chk Date	08/30/201
np Id	32						IL	Illinois SITW	M-8	350.00	5.07				Batch	SM
							MED	Medicare		350.00	5.07				Net	344.9
							SS	OASDI							Dir Dep Chk Amt	344.9
		Total Ea	rnings	0.00		350.00	Total Ta	TAS			5.07	Total Dec	Inctions	0.00	Chk/Ver#	275
		IGIAI E	i mings	0.00		330.00	Iuai I	iac.			5.07	Iotal Det	inchous	0.00	CIR VCI #	21,

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Payroll	Regi	ster						Compass N	Iarketin y (175583)	ng Inc			Check Date: Process: Period:	01/02/2013 to 2013010201 12/16/2012 to	to 20201019	01 29
Boshea Jr, David J Emp Id	32	Code KM R	Earning 401k Match Regular	Hours	Rate	Amount 333.33 8333.33	Code FITW IL MED SS	Tax Federal Income T Illinois SITW Medicare OASDI	Status M-8 M-8	Taxable 6937.87 6937.87 7854.54	Amount 983.74 312.73 113.89	Code 401K 401KL 401KL2 AFLPRE AUTO D4 HSA M-PPO4	Deduction 401K 401K Loan #2 AFLAC - pretax Auto Reimbursen Dental - Fam HSA BluePreferred PP	Amount 916.67 75.00 150.00 113.41 -250.00 29.20 150.00 186.18	Chk Date Batch	Reg 09/16/2013 SM2 5552.51 5552.51 0.00 2869
		Total Ea	rnings	0.00		8333.33	Total Ta	ixes			1410.36	Total Ded	luctions	1370.46		
Boshea Jr.		Code	Earning	Hours	Rate	Amount	Code	Tax	Status	Taxable	Amount	Code	Deduction	Amount	Type	Reg
David J		R	Regular			350.00	FITW	Federal Income T	100000000000000000000000000000000000000	350.00					Chk Date	09/16/2013
Emp Id	32						IL MED SS	Illinois SITW Medicare OASDI	M-8	350.00 350.00	5.08				Batch Net Dir Dep Chk Amt	SM2 344.92 344.92 0.00
		Total Ea	rnings	0.00		350.00	Total Ta	ixes			5.08	Total Ded	luctions	0.00	Chk/Vcr#	2870
Boshea Jr,		Code	Earning	Hours	Rate	Amount	Code	Tax	Status	Taxable	Amount	Code	Deduction	Amount	Type	Reg
David J		KM	401k Match	500.020		333.33	FITW	Federal Income T	M-8	6687.87	921.24	401K	401K	1166.67	Chk Date	10/01/2013
Emp Id	32	R	Regular			8333.33	IL MED SS	Illinois SITW Medicare OASDI	M-8	.6687.87 7854.54	300.23 113.89	401KL 401KL2 AFLPRE AUTO D4 HSA M-PPO4	401K Loan 401K Loan #2 AFLAC - pretax Auto Reimbursen Dental - Fam HSA BluePreferred PP	75.00 150.00 113.41 -250.00 29.20 150.00 186.18	Batch Net Dir Dep Chk Amt Chk/Vcr #	SM1 5377.51 5377.51 0.00 2989
		Total Ea	rnings	0.00		8333.33	Total Ta	ixes			1335.36	Total Ded	luctions	1620.46		
Boshea Jr,		Code	Earning	Hours	Rate	Amount	Code	Tax	Status	Taxable	Amount	Code	Deduction	Amount	Type	Reg
David J Emp Id	32	R	Regular	0.00		360.00	FITW IL MED SS	Federal Income T Illinois SITW Medicare OASDI	M-8 M-8	360.00 360.00 360.00	5.22	Tatal	luctions.	0.00	Chk Date Batch Net Dir Dep Chk Amt	10/01/2013 SM1 354.78 354.78 0.00
		Total Ea		0.00		360.00	Total Ta				5.22	Total Ded		0.00	Chk/Vcr#	2990
Boshea Jr,		Code	Earning	Hours	Rate	Amount	Code	Tax	Status	Taxable	Amount		Deduction	Amount		Reg
David J	20	KM	401k Match			333.33	FITW	Federal Income T		6687.87	921.24	401K	401K	1166.67	Chk Date	10/16/2013
Emp Id	32	R	Regular			8333.33	IL MED SS	Illinois SITW Medicare OASDI	M-8	6687.87 7854.54	300.23 113.89	401KL 401KL2 AFLPRE AUTO D4 HSA M-PPO4	401K Loan 401K Loan #2 AFLAC - pretax Auto Reimbursen Dental - Fam HSA BluePreferred PP	75.00 150.00 113.41 -250.00 29.20 150.00 186.18	Dir Dep	SM2 5377.51 5377.51 0.00 3102
			rnings	0.00			Total Ta							100.10		

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Payroll	Regi	ster					- 3	Compass N.	Iarketin y (175583)	g Inc				01/02/2013 to 2013010201 12/16/2012 to	to 202010190	Pa D1 2
Boshea Jr, David J Emp Id	32	Code R	Earning Regular	Hours	Rate	Amount 350.00	Code FITW IL MED SS	Tax Federal Income T Illinois SITW Medicare OASDI	M-8 M-8	Taxable 350.00 350.00 350.00	Amount 5.08	Code	Deduction	Amount	Type Chk Date Batch Net Dir Dep Chk Amt	Reg 10/16/2013 SM2 344.92 344.92 0.00
		Total Ea	rnings	0.00		350.00	Total Ta	xes			5.08	Total Ded	uctions	0.00		3103
oshea Jr.		Code	Earning	Hours	Rate	Amount	Code	Tax	Status	Taxable	Amount	Code	Deduction	Amount	Type	Reg
Pavid J Emp Id	32	KM R	401k Match Regular			333.33 8333.33	FITW IL MED SS		M-8 M-8	6687.87 6687.87 7854.54	921.24 300.23 113.89	401K 401KL 401KL2 AFLPRE AUTO D4 HSA M-PPO4	401K 401K Loan 401K Loan #2 AFLAC - pretax Auto Reimbursen Dental - Fam HSA BluePreferred PP	1166.67 75.00 150.00 113.41 -250.00 29.20 150.00 186.18	Chk Date Batch	11/01/2013 SM1 5377.51 5377.51 0.00 3230
		Total Ea	rnings	0.00		8333.33	Total Ta	xes			1335.36	Total Ded	uctions	1620.46		
Boshea Jr, David J Emp Id	32	Code R	Earning Regular	Hours	Rate	Amount 350.00	Code FITW IL MED SS	Illinois SITW Medicare OASDI	M-8 M-8	Taxable 350.00 350.00 350.00	Amount 5.07	Code	Deduction	Amount	Type Chk Date Batch Net Dir Dep Chk Amt	Reg 11/01/2013 SM1 344.93 344.93 0.00
		Total Ea	rnings	0.00		350.00	Total Ta	xes			5.07	Total Ded	uctions	0.00	Chk/Vcr#	3231
oshea Jr, David J Emp Id	32	Code KM R	Earning 401k Match Regular	Hours	Rate	8333.33	MED SS	Tax Federal Income T Illinois SITW Medicare OASDI	M-8 M-8	Taxable 6687.87 6687.87 7854.54	Amount 921.24 300.23 113.89	Code 401K 401KL 401KL2 AFLPRE AUTO D4 HSA M-PPO4	Deduction  401K  401K Loan  401K Loan #2  AFLAC - pretax  Auto Reimbursen  Dental - Fam  HSA  BluePreferred PP	150.00 113.41 -250.00 29.20 150.00 186.18	Chk Date Batch Net Dir Dep Chk Amt	Reg 11/15/2013 SM2 5377.51 5377.51 0.00 3342
		Total Ea	rnings	0.00		8333.33	Total Ta	xes			1335.36	Total Ded	uctions	1620.46		
Boshea Jr, David J Emp Id	32	Code R	Earning Regular	Hours	Rate	Amount 350.00	Code FITW IL MED SS	Tax Federal Income T Illinois SITW Medicare OASDI	M-8 M-8	Taxable 350.00 350.00 350.00	Amount 5.08		Deduction	Amount	Chk Date Batch Net Dir Dep Chk Amt	Reg 11/15/2013 SM2 344.92 344.92 0.00
		Total Ea	rnings	0.00		350.00	Total Ta	xes			5.08	<b>Total Ded</b>	uctions	0.00	Chk/Vcr#	3343

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Employee

Payroll	Regi	ster						Compass N	Iarketin y (175583)	ng Inc			Check Date: Process: Period:	01/02/2013 to 2013010201 12/16/2012 to	to 202010190	- 0
Boshea Jr,		Code	Earning	Hours	Rate	Amount	Code	Tax	Status	Taxable	Amount	Code	Deduction	Amount	Type	Reg
David J		KM	401k Match		1100	333.33	FITW	Federal Income T	M-8	6687.87	921.24	401K	401K	1166.67		12/02/2013
Emp Id	32	R	Regular			8333.33	IL	Illinois SITW	M-8	6687.87	300.23	401KL	401K Loan	75.00	Batch	SM1
							MED	Medicare		7854.54	113.89	401KL2	401K Loan #2	150.00	Net	5377.51
							SS	OASDI				AFLPRE	AFLAC - pretax	113.41	Dir Dep	5377.51
												AUTO	Auto Reimbursen	-250.00	Chk Amt	0.00
												D4	Dental - Fam	29.20	Chk/Vcr#	3460
												HSA	HSA	150.00		
												M-PPO4	BluePreferred PP	186.18		
		Total Ea	rnings	0.00		8333.33	Total Ta	ixes			1335.36	Total Dec	luctions	1620.46		
Boshea Jr,		Code	Earning	Hours	Rate	Amount		Tax	Status	Taxable	Amount		Deduction	Amount		Reg
David J		KM	401k Match			14.00	FITW	Federal Income T		8.39		401K	401K	49.00	Chk Date	12/02/2013
Emp Id	32	R	Regular			350.00		Illinois SITW	M-8	8.39		401KL	401K Loan	75.00	Batch	SMI
							MED	Medicare		57.39	0.83		401K Loan #2	150.00		32.56
							SS	OASDI				AFLPRE	A STATE OF THE STA		Dir Dep	32.56
												AUTO	Auto Reimbursen		Chk Amt	0.00
												D4	Dental - Fam	29.20	Chk/Vcr#	3461
				0.00		****					0.00	HSA	HSA	150.00		
		Total Ea	rnings	0.00		350.00	Total Ta	ixes			0.83	Total Dec	luctions	316.61		
Boshea Jr,		Code	Earning	Hours	Rate	Amount		Tax	Status	Taxable	Amount		Deduction	Amount		Reg
David J	200	KM	401k Match			333.33	FITW	Federal Income T		6687.87	921.24		401K	1166.67	Chk Date	12/16/2013
Emp Id	32	R	Regular			8333.33		Illinois SITW	M-8	6687.87	300.23		401K Loan		Batch	SM2
							MED	Medicare		7854.54	113.89	401KL2	401K Loan #2	150.00		5377.51
							SS	OASDI				AFLPRE	AFLAC - pretax			5377.51
												AUTO	Auto Reimbursen	-250.00		0.00
												D4	Dental - Fam		Chk/Vcr#	3572
												HSA	HSA	150.00		
		Total Ea	rnings	0.00		8333.33	Total Ta	200			1335.36	M-PPO4 Total Ded	BluePreferred PP	186.18 1620.46		
Boshea Jr,			Earning	Hours	Rate	10000	Code	Tax	Status	Taxable	Amount	1.00	Deduction		Time	Reg
David J		Code R	Regular	nours	Kate	350.00	FITW	Federal Income T		350.00	Amount	Code	Deduction	Amount	Type Chk Date	12/16/2013
Emp Id	32	K	regular			330.00	IL.	Illinois SITW	M-8	350.00					Batch	SM2
rmp to	32						MED	Medicare	141-0	350.00	5.08				Net	344.92
							SS	OASDI		330.00	3.08				Dir Dep	344.92
							33	ORDDI							Chk Amt	0.00
		Total Ea	rninge	0.00		350.00	Total Ta	TOC			5.08	Total Ded	Inctions	0.00	Chk/Vcr#	3573
		Total La	5	0.00		550.00	ZUIMI I				2.00	Total Det	inc mana	0.00	CILL VCI II	3313

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Payroll	Regi	ster						Compass M. Compan	larketin y (175583)	g Inc			Check Date: Process: Period:	01/02/2013 to 2013010201 to 12/16/2012 to	to 202010190	01 3
Boshea Jr, David J		Code HSA	Earning HSA - Employer	Hours	Rate	Amount 2600.00	Code FITW	Tax Federal Income T	57.07.	Taxable 6687.87	Amount 909.47	401K	Deduction 401K	Amount 1166.67	Chk Date	Reg 01/02/2014
Emp Id	32	KM	401k Match			333.33	IL	Illinois SITW	M-8	6687.87	299.39	401KL	401K Loan		Batch	SM1
		R	Regular			8333.33		Medicare		7854.54	113.89	401KL2 AFLPRE	401K Loan #2	150.00		4903.14
							SS	OASDI		7854.54	486.98	ALTO	AFLAC - pretax Auto Reimbursen	113.41 -250.00	Dir Dep Chk Amt	4903.14 0.00
												D4	Dental - Fam	29.20		3690
												HSA	HSA	150.00		
		Total Ea	eminas	0.00		8333.33	Total Ta	TAG			1809.73	M-PPO4 Total Ded	BluePreferred PP	186.18 1620.46		
la					350				20.3-	- Laure 201					22	2.4
oshea Jr,		Code	Earning	Hours	Rate	Amount	Code FITW	Tax	Status	Taxable	Amount	Code	Deduction	Amount	Type	Reg
avid J imp Id	32	R	Regular			350.00	IL	Federal Income T Illinois SITW	M-8 M-8	350.00 350.00					Chk Date Batch	01/02/2014 SM1
шр ю	32						MED	Medicare	171-0	350.00	5.08				Net	323.22
							SS	OASDI		350.00	21.70				Dir Dep	323.22
								511521		330.00	22				Chk Amt	0.00
		Total Ea	rnings	0.00		350.00	Total Ta	ixes			26.78	Total Ded	luctions	0.00	Chk/Vcr#	3691
oshea Jr,		Code	Earning	Hours	Rate	Amount	Code	Tax	Status	Taxable	Amount	Code	Deduction	Amount	Type	Reg
avid J		KM	401k Match			333.33	FITW	Federal Income T	3.6	7354.54	1076.14	401K	401K	500.00	Chk Date	01/16/2014
mp Id	32	R	Regular			8333.33	IL MED	Illinois SITW	M-8	7354.54 7854.54	332.73		401K Loan 401K Loan #2	75.00		SM2
							MED SS	Medicare OASDI		7854.54 7854.54	113.89 486.98		AFLAC - pretax	150.00 113.41	Dir Dep	5369.80 5369.80
							33	OASDI		7654.54	400.20	AUTO	Auto Reimbursen	-250.00		0.00
												D4	Dental - Fam	29.20	Chk/Vcr#	3808
												HSA	HSA	150.00		
		TAIR		0.00		0222.22	Total Ta	E.F. 2			2000 74	M-PPO4	BluePreferred PP	186.18 953.79		
		Total Ea		0.00		8333.33					2009.74	Total Ded			_	2.
oshea Jr, avid J		Code R	Earning Regular	Hours	Rate	350.00	Code FITW	Tax Federal Income T	Status	Taxable 350.00	Amount	Code	Deduction	Amount	Type Chk Date	Reg 01/16/2014
mp Id	32	K	Regulai			330.00	IL	Illinois SITW	M-8	350.00					Batch	SM2
тр ю	32						MED	Medicare	IVI-0	350.00	5.07				Net	323.23
							SS	OASDI		350.00	21.70				Dir Dep	323.23
				0.00		250.00				Caree -	26.55	T. ID.		0.00	Chk Amt	0.00
		Total Ea		0.00		350.00	Total Ta		C	T 11	26.77	Total Ded	52001 San	0.00	Chk/Vcr#	3809
oshea Jr, avid J		Code	Earning 401k Match	Hours	Rate	333.33	Code	Tax Federal Income T	Status M-8	Taxable 7278.05	Amount 1057.01	Code 401K	Deduction 401K	500.00	Type Chk Date	Reg 02/03/2014
mp Id	32	R	Regular			8333.33		Illinois SITW	M-8	7278.05	328.49		401K Loan	75.00	Batch	SM1
mp m	12	IX.	regular			0555.55	MED	Medicare	171-0	7778.05	112.78		401K Loan #2	150.00		5322.53
							SS	OASDI		7778.05		AFLPRE	AFLAC - pretax	113.41	Dir Dep	5322.53
												AUTO	Auto Reimbursen	-250.00	Chk Amt	0.00
												D4	Dental - Fam		Chk/Vcr#	3936
												HSA	HSA	150.00		
												M-PPO4	BluePreferred PP	258.70		
		m		0.00		0222.22	T	ra.			1000 **	V4	Vision - Fam	1.00		
		Total Ea	rnings	0.00		8333.33	Total Ta	ixes			1980.52	Total Ded	uctions	1030.28		

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Employee

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Payroll	Regi	ster						Compass N	Iarketin y (175583)	g Inc			Check Date: Process: Period:	01/02/2013 to 2013010201 12/16/2012 to	to 20201019	01 3
Boshea Jr, David J Emp Id	32	Code R	Earning Regular	Hours	Rate	Amount 350.00	Code FITW IL MED SS	Tax Federal Income T Illinois SITW Medicare OASDI	Status M-8 M-8	Taxable 350.00 350.00 350.00 350.00	5.08 21.70	Code	Deduction	Amount	Type Chk Date Batch Net Dir Dep Chk Amt	Reg 02/03/2014 SM1 323.22 323.22 0.00
		Total Ea	ırnings	0.00		350.00	Total Ta	ixes			26.78	Total Dec	luctions	0.00	Chk/Vcr#	3937
Boshea Jr, David J Emp Id	32	Code KM R	Earning 401k Match Regular	Hours	Rate	Amount 333.33 8333.33	Code FITW IL MED SS	Tax Federal Income T Illinois SITW Medicare OASDI	M-8 M-8	Taxable 7278.05 7278.05 7778.05 7778.05	Amount 1057.01 328.49 112.78 482.24		Deduction  401K  401K Loan  401K Loan #2  AFLAC - pretax  Auto Reimburser  Dental - Fam  HSA  BluePreferred PP  Vision - Fam	Amount 500.00 75.00 150.00 113.41 -250.00 32.17 150.00 258.70 1.00	Chk Date Batch	Reg 02/14/2014 SM2 5322.53 5322.53 0.00 4049
		Total Ea	rnings	0.00		8333.33	Total Ta	ixes		7. 25.	1980.52	Total Dec	luctions	1030.28		
Boshea Jr, David J Emp Id	32	Code R	Earning Regular	Hours	Rate	Amount 380.00	Code FITW IL MED SS	Tax Federal Income T Illinois SITW Medicare OASDI	Status M-8 M-8	Taxable 380.00 380.00 380.00 380.00	5.51 23.56	Code	Deduction	Amount	Type Chk Date Batch Net Dir Dep Chk Amt	Reg 02/14/2014 SM2 350.93 350.93 0.00
		Total Ea	rnings	0.00		380.00	Total Ta	ixes			29.07	Total Dec	luctions	0.00	Chk/Vcr#	4050
Boshea Jr, David J Emp Id	32	Code KM R	Earning 401k Match Regular	Hours	Rate	Amount 333.33 8333.33	Code FITW IL MED SS	Tax Federal Income T Illinois SITW Medicare OASDI	Status M-8 M-8	Taxable 7278.05 7278.05 7778.05 7778.05	Amount 1057.01 328.49 112.78 482.24	Code 401K 401KL 401KL2 AFLPRE AUTO D4 HSA M-PPO4 V4	Deduction  401K  401K Loan  401K Loan #2  AFLAC - pretax  Auto Reimbursen  Dental - Fam  HSA  BluePreferred PP  Vision - Fam	Amount 500.00 75.00 150.00 113.41 -250.00 32.17 150.00 258.70 1.00	Chk Date Batch	Reg 03/03/2014 SM1 5322.53 5322.53 0.00 4172
		Total Ea	rnings	0.00		8333.33	Total Ta	ixes			1980.52	Total Dec		1030.28		
Boshea Jr; David J Emp Id	32	Code R	Earning Regular	Hours	Rate	Amount 350.00	Code FITW IL MED SS	Tax Federal Income T Illinois SITW Medicare OASDI	Status M-8 M-8	Taxable 350.00 350.00 350.00 350.00	5.08 21.70	Code	Deduction	Amount	Type Chk Date Batch Net Dir Dep Chk Amt	Reg 03/03/2014 SM1 323.22 323.22 0.00
		Total Ea	rnings	0.00		350.00	Total Ta	ixes			26.78	Total Dec	luctions	0.00	Chk/Vcr#	4173

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Employee

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Payroll	Regi	ister						Compass N	Iarketir ny (175583)	ng Inc			Check Date: Process: Period:	01/02/2013 to 2013010201 12/16/2012 to	to 20201019	01 303
Boshea Jr, David J Emp Id	32	Code KM R	Earning 401k Match Regular	Hours	Rate	Amount 333.33 8333.33	FITW	Tax Federal Income T Illinois SITW Medicare OASDI	Status M-8 M-8	Taxable 7278.05 7278.05 7778.05 7778.05	Amount 1057.01 328.49 112.78 482.24	401K 401KL 401KL2	Deduction 401K 401K Loan 401K Loan #2 AFLAC - pretax Auto Reimbursen Dental - Fam HSA BluePreferred PP Vision - Fam	Amount 500.00 75.00 150.00 113.41 -250.00 32.17 150.00 258.70 1.00	Chk Date Batch Net Dir Dep Chk Amt	Reg 03/14/2014 SM2 5322.53 5322.53 0.00 4284
		Total Ea	rnings	0.00		8333.33	Total Ta	ixes			1980.52	Total Ded	1000000	1030.28		
Boshea Jr, David J Emp Id	32	Code R	Earning Regular	Hours	Rate	Amount 350.00	Code FITW IL MED SS	Tax  Federal Income T Illinois SITW Medicare OASDI	Status M-8 M-8	Taxable 350.00 350.00 350.00 350.00	5.07 21.70	Code	Deduction	Amount	Type Chk Date Batch Net Dir Dep Chk Amt	Reg 03/14/2014 SM2 323.23 323.23 0.00
		Total Ea	rnings	0.00		350.00	Total Ta	ixes			26.77	Total Ded	uctions	0.00		4285
Boshea Jr,		Code	Earning	Hours	Rate	Amount	2	Tax	Status	Taxable	Amount	Code	Deduction	Amount	Type	Reg
David J Emp Id	32	KM R	401k Match Regular			333.33 8333.33	MED SS	Federal Income T Illinois SITW Medicare OASDI	M-8 M-8	7278.05 7278.05 7778.05 7778.05	1057.01 328.49 112.79 482.24	401K 401KL 401KL2 AFLPRE AUTO D4 HSA M-PPO4 V4	401K 401K Loan 401K Loan #2 AFLAC - pretax Auto Reimbursen Dental - Fam HSA BluePreferred PP Vision - Fam	500.00 75.00 150.00 113.41 -250.00 32.17 150.00 258.70 1.00	Dir Dep Chk Amt	04/01/2014 SM1 5322.52 5322.52 0.00 4409
		Total Ea	rnings	0.00		8333.33	Total Ta	ixes			1980.53	Total Ded	uctions	1030.28		
Boshea Jr, David J Emp Id	32	Code R	Earning Regular	Hours	Rate	Amount 350.00	Code FITW IL MED SS	Tax Federal Income T Illinois SITW Medicare OASDI	Status M-8 M-8	Taxable 350.00 350.00 350.00 350.00	5.07 21.70	Code	Deduction	Amount	Type Chk Date Batch Net Dir Dep Chk Amt	Reg 04/01/2014 SM1 323.23 323.23 0.00
		Total Ea	rnings	0.00		350.00	Total Ta	ixes			26.77	Total Ded	uctions	0.00	Chk/Vcr#	4410

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Employee

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Payroll	Regi	ster						Compass N	Iarketin y (175583)	g Inc			Check Date: Process: Period:	01/02/2013 to 2013010201 12/16/2012 to	to 20201019	01 30
Boshea Jr,		Code	Earning	Hours	Rate	Amount	Code	Tax	Status	Taxable	Amount	Code	Deduction	Amount	Туре	Reg
David J		KM	401k Match			333,33	FITW	Federal Income T	M-8	7278.05	1057.01	401K	401K	500.00	Chk Date	04/16/2014
Emp Id	32	R	Regular			8333.33	IL	Illinois SITW	M-8	7278.05	328.49	401KL	401K Loan	75.00	Batch	SM2
							MED	Medicare		7778.05	112.78	401KL2	401K Loan #2	150.00	Net	5322.53
							SS	OASDI		7778.05	482.24	AFLPRE	AFLAC - pretax		Dir Dep	5322.53
												AUTO	Auto Reimbursen	-250.00	Chk Amt	0.00
												D4	Dental - Fam	32.17	Chk/Vcr#	4532
												HSA	HSA	150.00		
												M-PPO4	BluePreferred PP	258.70		
		Total Ea	uminas	0.00		8333.33	Total Ta	arac.			1980.52	V4 Total Ded	Vision - Fam	1.00		
					E.G.				2000						4.0	244
Boshea Jr,		Code	Earning	Hours	Rate	350.00	Code	Tax	Status	Taxable	Amount	Code	Deduction	Amount	24	Reg
David J Emp Id	32	R	Regular			330.00	IL.	Federal Income T Illinois SITW	M-8 M-8	350.00 350.00					Chk Date Batch	04/16/2014 SM2
Emp to	34						MED	Medicare	IVI-0	350.00	5.08				Net	323.22
							SS	OASDI		350.00	21.70				Dir Dep	323.22
							55	Oribbi		330.00	21.70				Chk Amt	0.00
		Total Ea	rnings	0.00		350.00	Total Ta	ixes			26.78	Total Ded	uctions	0.00	Chk/Vcr#	4533
Boshea Jr,		Code	Earning	Hours	Rate	Amount	Code	Tax	Status	Taxable	Amount	Code	Deduction	Amount	Type	Reg
David J		KM	401k Match			333.33	FITW	Federal Income T	M-8	7278.05	1057.01	401K	401K	500.00	Chk Date	05/01/2014
Emp Id	32	R	Regular			8333.33	IL	Illinois SITW	M-8	7278.05	328.49	401KL	401K Loan	75.00	Batch	SM1
							MED	Medicare		7778.05	112.78	401KL2	401K Loan #2	150.00		5322.53
							SS	OASDI		7778.05	482.24		AFLAC - pretax	E	Dir Dep	5322.53
												AUTO	Auto Reimbursen	-250.00	Chk Amt	0.00
												D4	Dental - Fam	32.17	Chk/Vcr#	4656
												HSA	HSA	150.00		
												M-PPO4 V4	BluePreferred PP Vision - Fam	258.70 1.00		
		Total Ea	rnings	0.00		8333.33	Total Ta	ixes			1980.52	Total Ded		1030.28		
Boshea Jr,		Code	Earning	Hours	Rate	Amount		Tax	Status	Taxable	Amount		Deduction	Amount	Type	Reg
David J		R	Regular	22043	44110	350.00	FITW	Federal Income T	1,000	350.00	, and the		_ care aou	· mount	Chk Date	05/01/2014
Emp Id	32	77					IL	Illinois SITW	M-8	350.00					Batch	SM1
							MED	Medicare		350.00	5.07				Net	323.23
							SS	OASDI		350.00	21.70				Dir Dep	323.23
															Chk Amt	0.00
							Total Ta								CHR 2 HH	0.00

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Employee

Payroll	Regi	ster						Compass N	Iarketin y (175583)	g Inc			Check Date: Process: Period:	01/02/2013 to 2013010201 12/16/2012 to	to 20201019	01 305
Boshea Jr,		Code	Earning	Hours	Rate	Amount	Code	Tax	Status	Taxable	Amount	Code	Deduction	Amount	Type	Reg
David J		KM	401k Match		1100	333.33	FITW	Federal Income T	M-8	7278.05	1057.01	401K	401K	500.00	Chk Date	05/16/2014
Emp Id	32	R	Regular			8333.33	IL	Illinois SITW	M-8	7278.05	328.49	401KL	401K Loan	75.00	Batch	SM2
							MED	Medicare		7778.05	112.79	401KL2	401K Loan #2	150.00	Net	5322.52
							SS	OASDI		7778.05	482.24	AFLPRE	AFLAC - pretax	113.41	Dir Dep	5322.52
												AUTO	Auto Reimbursen	-250.00	Chk Amt	0.00
												D4	Dental - Fam	32.17	Chk/Vcr#	4773
												HSA	HSA	150.00		
												M-PPO4	BluePreferred PP	258.70		
												V4	Vision - Fam	1.00		
		Total Ea	rnings	0.00		8333.33	Total Ta				1980.53	Total Ded	uctions	1030.28		
Boshea Jr,		Code	Earning	Hours	Rate	Amount	Code	Tax	Status	Taxable	Amount	Code	Deduction	Amount		Reg
David J	22	R	Regular			350.00	FITW	Federal Income T		350.00					Chk Date	05/16/2014
Emp Id	32						IL	Illinois SITW	M-8	350.00					Batch	SM2
							MED	Medicare		350.00	5.07				Net	323.23
							SS	OASDI		350.00	21.70				Dir Dep Chk Amt	323.23 0.00
		Total Ea	rnings	0.00		350.00	Total Ta	ixes			26.77	Total Ded	uctions	0.00	Chk/Vcr#	4774
Boshea Jr,		Code	Earning	Hours	Rate	Amount	Code	Tax	Status	Taxable	Amount	Code	Deduction	Amount	Type	Reg
David J		R	Regular	Hours	Rate	8333.33	FITW	Federal Income T		7778.05	1182.01	401KL	401K Loan	75.00	Chk Date	06/02/2014
Emp Id	32		regum			0333.33	IL	Illinois SITW	M-8	7778.05	353.49	401KL2	401K Loan #2	150.00	Batch	SMI
Linp 10							MED	Medicare		7778.05			AFLAC - pretax	113.41		5672.54
							SS	OASDI		7778.05			Auto Reimbursen	-250.00		5672.54
												D4	Dental - Fam	32.17	Chk Amt	0.00
												HSA	HSA	150.00	Chk/Vcr#	4896
												M-PPO4	BluePreferred PP	258.70		
												V4	Vision - Fam	1.00		
		Total Ea	rnings	0.00	1	8333.33	Total Ta	ixes			2130.51	Total Ded	uctions	530.28		
Boshea Jr,		Code	Earning	Hours	Rate	Amount	Code	Tax	Status	Taxable	Amount	Code	Deduction	Amount	Type	Reg
David J		R	Regular			350.00	FITW	Federal Income T		54.42		401KL	401K Loan	75.00	Chk Date	06/02/2014
Emp Id	32						IL	Illinois SITW	M-8	54.42		401KL2	401K Loan #2	150.00	Batch	SM1
							MED	Medicare		54.42		AFLPRE	AFLAC - pretax	113.41		75.25
							SS	OASDI		54.42	3.38	AUTO	Auto Reimbursen		Dir Dep	75.25
												D4	Dental - Fam	32.17	Chk Amt	0.00
				78.			_					HSA	HSA	150.00	Chk/Vcr#	4897
		Total Ea	rnings	0.00		350.00	Total Ta	207			4.17	Total Ded	nctions	270.58		

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Employee

Payroll	Regi	ster						Compass N	Iarketin y (175583)	g Inc			Check Date: Process: Period:	01/02/2013 to 2013010201 12/16/2012 to	to 20201019	01 30
Boshea Jr, David J Emp Id	32	Code R	Earning Regular	Hours	Rate	Amount 8333.33	Code FITW IL MED SS	Tax  Federal Income T Illinois SITW Medicare OASDI	Status M-8 M-8	Taxable 7778.05 7778.05 7778.05 7778.05	Amount 1182.01 353.49 112.78 482.24	Code 401KL 401KL2 AFLPRE AUTO D4 HSA M-PPO4 V4	Deduction 401K Loan 401K Loan #2 AFLAC - pretax Auto Reimbursen Dental - Fam HSA BluePreferred PP Vision - Fam	Amount 75.00 150.00 113.41 -250.00 32.17 150.00 258.70 1.00	Chk Date Batch	Reg 06/16/2014 SM2 5672.53 5672.53 0.00 5014
		Total Ea	rnings	0.00		8333.33	Total Ta	ixes			2130.52	Total Ded	luctions	530.28		
Boshea Jr,		Code	Earning	Hours	Rate	Amount	Code	Tax	Status	Taxable	Amount	Code	Deduction	Amount	Type	Reg
David J		R	Regular			350.00	FITW	Federal Income T	M-8	350.00					Chk Date	06/16/2014
Emp Id	32						IL	Illinois SITW	M-8	350.00					Batch	SM2
							MED	Medicare		350.00	5.08				Net	323.22
							SS	OASDI		350.00	21.70				Dir Dep	323.22
		Total Ea	rnings	0.00		350.00	Total Ta	ixes			26.78	Total Ded	luctions	0.00	Chk Amt Chk/Vcr#	0.00 5015
Boshea Jr,		Code	Earning	Hours	Rate	Amount	Code	Tax	Status	Taxable	Amount	Code	Deduction	Amount	Type	Reg
David J		R	Regular	Hours	Tate	8333.33	FITW	Federal Income T	The district of the last	7778.05	1182.01	401KL	401K Loan	75.00	Chk Date	07/01/2014
Emp Id	32		regum			0333.22	IL	Illinois SITW	M-8	7778.05	353.49	401KL2	401K Loan #2	150.00	Batch	SMI
							MED	Medicare	-	7778.05	112.78	AFLPRE	AFLAC - pretax	113.41		5672.53
							SS	OASDI		7778.05	482.24		Auto Reimbursen	-250.00	Dir Dep	5672.53
												D4	Dental - Fam	32.17	Chk Amt	0.00
												HSA	HSA	150.00	Chk/Vcr#	5145
												M-PPO4	BluePreferred PP	258.70		
												V4	Vision - Fam	1.00		
		Total Ea	rnings	0.00		8333.33	Total Ta	ixes			2130.52	Total Ded	luctions	530.28		
Boshea Jr,		Code	Earning	Hours	Rate	Amount	Code	Tax	Status	Taxable	Amount	Code	Deduction	Amount	Type	Reg
David J		R	Regular			350.00	FITW	Federal Income T	M-8	350.00					Chk Date	07/01/2014
Emp Id	32						IL.	Illinois SITW	M-8	350.00					Batch	SMI
							MED	Medicare		350.00	5.07				Net	323.23
							SS	OASDI		350.00	21.70				Dir Dep	323.23
		Total Ea	rnings	0.00		350.00	Total Ta	ixes			26.77	Total Ded	luctions	0.00	Chk/Vcr#	0.00 5146
Boshea Jr,		Code	Earning	Hours	Rate	Amount	Code	Tax	Status	Taxable	Amount	Code	Deduction	Amount	Type	Reg
David J		R	Regular	110015	THE	8333.33	FITW	Federal Income T	- 1000 240 400 500	7778.05	1182.01	401KL	401K Loan	75.00	Chk Date	07/16/2014
Emp Id	32	.77				4.25.55	IL	Illinois SITW	M-8	7778.05	353.49	401KL2	401K Loan #2	150.00	Batch	SM2
-							MED	Medicare		7778.05	112.79	AFLPRE	AFLAC - pretax	113.41		5672.52
							SS	OASDI		7778.05			Auto Reimbursen	-250.00	Dir Dep	5672.52
								20,000		400		D4	Dental - Fam	32.17		0.00
												HSA	HSA	150.00	Chk/Vcr#	5277
												M-PPO4	BluePreferred PP	258.70		
												V4	Vision - Fam	1.00		
		Total Ea	rninge	0.00		8333 33	Total Ta	TOS.			2130.53	Total Ded	100	530,28		

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Employee

Payroll	Regi	ster						Compass N.	larketin y (175583)	g Inc			Check Date: Process: Period:	01/02/2013 to 2013010201 12/16/2012 to	to 20201019	01 3
Boshea Jr, David J Emp Id	32	Code R	Earning Regular	Hours	Rate	Amount 350.00	Code FITW IL MED SS	Tax Federal Income T Illinois SITW Medicare OASDI	Status M-8 M-8	Taxable 350.00 350.00 350.00 350.00	5.07 21.70	Code	Deduction	Amount	Type Chk Date Batch Net Dir Dep Chk Amt	Reg 07/16/2014 SM2 323.23 323.23 0.00
		Total Ea	rnings	0.00		350.00	Total Ta	ixes			26.77	Total Dec	uctions	0.00		5278
Boshea Jr,		Code	Earning	Hours	Rate	Amount	Code	Tax	Status	Taxable	Amount	Code	Deduction	Amount	Type	Reg
David J Emp Id	32	R	Regular			8333.33	FITW IL MED SS	Federal Income T Illinois SITW Medicare OASDI	M-8 M-8	7778.05 7778.05 7778.05 3319.90	1182.01 353.49 112.78 205.83	401KL 401KL2 AFLPRE AUTO D4 HSA M-PPO4 V4	401K Loan 401K Loan #2 AFLAC - pretax Auto Reimbursen Dental - Fam HSA BluePreferred PP Vision - Fam	75.00 150.00 113.41 -250.00 32.17 150.00 258.70 1.00	Chk Date Batch Net Dir Dep	08/01/2014 SM1 5948.94 5948.94 0.00 5416
		Total Ea	rnings	0.00		8333.33	Total Ta	ixes			1854.11	Total Dec	uctions	530.28		
Boshea Jr, David J Emp Id	32	Code R	Earning Regular	Hours	Rate	Amount 350.00	Code FITW IL MED SS	Tax Federal Income T Illinois SITW Medicare OASDI	M-8 M-8	Taxable 350.00 350.00 350.00	Amount 5.08	Code	Deduction	Amount	Type Chk Date Batch Net Dir Dep Chk Amt	Reg 08/01/2014 SM1 344.92 344.92 0.00
		Total Ea	rnings	0.00	-	350.00	Total Ta	ixes			5.08	Total Ded	uctions	0.00	Chk/Vcr#	5417
Boshea Jr, David J Emp Id	32	Code R	Earning Regular	Hours	Rate	Amount 8333.33	Code FITW IL MED SS	Tax Federal Income T Illinois SITW Medicare OASDI	M-8 M-8	Taxable 7778.05 7778.05 7778.05	Amount 1182.01 353.49 112.78	Code 401KL 401KL2 AFLPRE AUTO D4 HSA M-PPO4 V4	Deduction 401K Loan 401K Loan #2 AFLAC - pretax Auto Reimbursen Dental - Fam HSA BluePreferred PP Vision - Fam	75.00 150.00 113.41 -250.00 32.17 150.00 258.70 1.00	Chk Date Batch Net Dir Dep Chk Amt	Reg 08/18/2014 SM2 6154.77 6154.77 0.00 5553
		Total Ea	rnings	0.00		8333.33	Total Ta	ixes	L		1648.28	Total Dec	uctions	530.28		
Boshea Jr, David J Emp Id	32	Code R	Earning Regular	Hours	Rate	Amount 350.00	Code FITW IL MED SS	Tax Federal Income T Illinois SITW Medicare OASDI	M-8 M-8	Taxable 350.00 350.00 350.00	Amount 5.07		Deduction	Amount	Chk Date Batch Net Dir Dep Chk Amt	Reg 08/18/2014 SM2 344.93 344.93 0.00
		Total Ea	rnings	0.00		350.00	Total Ta	ixes			5.07	Total Ded	uctions	0.00	Chk/Vcr#	5554

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Employee

Payroll l	Regi	ster						Compass N	Iarketin ny (175583)	ng Inc			Check Date: Process: Period:	01/02/2013 to 2013010201 12/16/2012 to	to 20201019	01 30
Boshea Jr, David J Emp Id	32	Code R	Earning Regular	Hours	Rate	Amount 8333.33	Code FITW IL MED SS	Tax Federal Income T Illinois SITW Medicare OASDI	Status M-8 M-8	Taxable 7778.05 7778.05 7778.05	Amount 1182.01 353.49 112.79	401KL 401KL2 AFLPRE AUTO D4 HSA M-PPO4 V4	Deduction 401K Loan 401K Loan #2 AFLAC - pretax Auto Reimbursen Dental - Fam HSA BluePreferred PP Vision - Fam	Amount 75.00 150.00 113.41 -250.00 32.17 150.00 258.70 1.00	Chk Date Batch	Reg 08/29/2014 SM1 6154.76 6154.76 0.00 5686
		Total Ea	rnings	0.00		8333.33	Total Ta	ixes			1648.29	Total Dec	luctions	530.28		
Boshea Jr,		Code	Earning	Hours	Rate	Amount	Code	Tax	Status	Taxable	Amount	Code	Deduction	Amount	Type	Reg
David J		R	Regular	10000000		350.00	FITW	Federal Income T	M-8	350.00		-	- 100 C 100		Chk Date	08/29/2014
Emp Id	32						IL MED SS	Illinois SITW Medicare OASDI	M-8	350.00 350.00	5.07				Batch Net Dir Dep Chk Amt	SM1 344.93 344.93 0.00
		Total Ea	rnings	0.00		350.00	Total Ta	ixes			5.07	Total Ded	luctions	0.00	Chk/Vcr#	5687
Boshea Jr,		Code	Earning	Hours	Rate	Amount	Code	Tax	Status	Taxable	Amount	Code	Deduction	Amount	Type	Reg
David J Emp Id	32	R	Regular			8333.33	FITW IL MED SS	Federal Income T Illinois SITW Medicare OASDI	M-8 M-8	7778.05 7778.05 7778.05	1182.01 353.49 112.78	401KL 401KL2 AFLPRE AUTO D4 HSA M-PPO4 V4	401K Loan 401K Loan #2 AFLAC - pretax Auto Reimbursen Dental - Fam HSA BluePreferred PP Vision - Fam	75.00 150.00 113.41 -250.00 32.17 150.00 258.70 1.00	Chk Date Batch	09/16/2014 SM2 6154.77 6154.77 0.00 5818
		Total Ea	rnings	0.00		8333.33	Total Ta	ixes			1648.28	Total Dec	luctions	530.28		
Boshea Jr,		Code	Earning	Hours	Rate	Amount	Code	Tax	Status	Taxable	Amount	Code	Deduction	Amount	Type	Reg
David J Emp Id	32	R	Regular			350.00	FITW IL MED SS	Federal Income T Illinois SITW Medicare OASDI	M-8 M-8	350.00 350.00 350.00	5.08				Chk Date Batch Net Dir Dep Chk Amt	09/16/2014 SM2 344.92 344.92 0.00
		Total Ea	rnings	0.00		350.00	Total Ta	ixes			5.08	Total Dec	luctions	0.00	Chk/Vcr#	5819
Boshea Jr,		Code	Earning	Hours	Rate	Amount	Code	Tax	Status	Taxable	Amount		Deduction	Amount		Reg
David J		R	Regular			8333.33	FITW	Federal Income T		7778.05	1182.01	401KL	401K Loan	75.00	Chk Date	10/01/2014
Emp Id	32						IL MED SS	Illinois SITW Medicare OASDI	M-8	7778.05 7778.05	353.49 112.78	401KL2 AFLPRE AUTO D4 HSA M-PPO4 V4	401K Loan #2 AFLAC - pretax Auto Reimbursen Dental - Fam HSA BluePreferred PP Vision - Fam	150.00 113.41 -250.00 32.17 150.00 258.70 1.00	Dir Dep	SM1 6154.77 6154.77 0.00 5948
		Total Ea	rnings	0.00		8333.33	Total Ta	ixes			1648.28	_		530.28		

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Employee

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Payroll	Regi	ster						Compass N. Compan	Iarketin y (175583)	g Inc			Check Date: Process: Period:	01/02/2013 to 2013010201 12/16/2012 to	to 20201019	01
oshea Jr,		Code	Earning	Hours	Rate	Amount	Code	Tax	Status	Taxable	Amount	Code	Deduction	Amount	Туре	Reg
avid J		R	Regular			350.00	FITW	Federal Income T	57774	350.00					Chk Date	10/01/2014
Emp Id	32						IL	Illinois SITW	M-8	350.00	00.10				Batch	SM1
							MED	Medicare		350.00	5.08				Net	344.92
							SS	OASDI							Dir Dep Chk Amt	344.92 0.00
		Total Ea	rnings	0.00		350.00	Total Ta	ixes			5.08	Total Ded	luctions	0.00		5949
oshea Jr,		Code	Earning	Hours	Rate	Amount	Code	Tax	Status	Taxable	Amount	Code	Deduction	Amount	Type	Reg
avid J		R	Regular			8333.33	FITW	Federal Income T		7778.05	1182.01	401KL	401K Loan	75.00	Chk Date	10/16/2014
mp Id	32						IL	Illinois SITW	M-8	7778.05	353.49	401KL2	401K Loan #2	150.00	Batch	SM2
							MED	Medicare		7778.05	112.78		AFLAC - pretax	113.41		6154.77
							SS	OASDI				AUTO D4	Auto Reimbursen Dental - Fam	-250.00 32.17	Dir Dep Chk Amt	6154.77 0.00
												HSA	HSA	150.00		6077
												M-PPO4	BluePreferred PP	258.70		0017
												V4	Vision - Fam	1.00		
		Total Ea	rnings	0.00		8333.33	Total Ta	ixes			1648.28	Total Ded	luctions	530.28		
oshea Jr,		Code	Earning	Hours	Rate	Amount	Code	Tax	Status	Taxable	Amount	Code	Deduction	Amount	Type	Reg
avid J		R	Regular			350.00	FITW	Federal Income T		350.00					Chk Date	10/16/2014
mp Id	32						IL MED	Illinois SITW Medicare	M-8	350.00	5.07				Batch Net	SM2 344.93
							SS	OASDI		350.00	5.07				Dir Dep	344.93
							33	OASDI							Chk Amt	0.00
		Total Ea	rnings	0.00	-	350.00	Total Ta	ixes			5.07	Total Ded	luctions	0.00	Chk/Vcr#	6078
oshea Jr,		Code	Earning	Hours	Rate	Amount	Code	Tax	Status	Taxable	Amount	Code	Deduction	Amount		Reg
avid J		R	Regular			8333.33	FITW	Federal Income T		7778.05	1182.01	401KL	401K Loan	75.00	Chk Date	10/31/2014
mp Id	32						IL	Illinois SITW	M-8	7778.05	353.49	401KL2	401K Loan #2	150.00		SMI
							MED SS	Medicare OASDI		7778.05	112.78	AFLPRE AUTO	AFLAC - pretax Auto Reimbursen	113.41	Dir Dep	6154.77 6154.77
							33	OASDI				D4	Dental - Fam	32.17	Chk Amt	0.00
												HSA	HSA	150.00		6203
												M-PPO4	BluePreferred PP	258.70		
											-	V4	Vision - Fam	1.00		
		Total Ea	rnings	0.00		8333.33	Total Ta	ixes			1648.28	Total Ded	luctions	530.28		
oshea Jr,		Code	Earning	Hours	Rate	Amount	Code	Tax	Status	Taxable	Amount	Code	Deduction	Amount		Reg
avid J	22	R	Regular			350.00	FITW	Federal Income T		350.00					Chk Date	10/31/2014
mn ld	32						IL MED	Illinois SITW	M-8	350.00	5.00				Batch	SM1
mp id							MED SS	Medicare OASDI		350.00	5.08				Net	344.92
тр к															Dir Lien	
mp Id							33	UASDI							Dir Dep Chk Amt	344.92 0.00

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Payroll	Payroll Register								Iarketin y (175583)	ng Inc			Check Date: Process: Period:	to 202010190 to 10/19/2020	020101901 3	
Boshea Jr, David J Emp Id	32	Code R	Earning Regular	Hours	Rate	Amount 8333.33	FITW IL MED SS	Tax Federal Income T Illinois SITW Medicare OASDI	Status M-8 M-8	Taxable 7778.05 7778.05 7778.05		Code 401KL 401KL2 AFLPRE AUTO D4 HSA M-PPO4 V4	Deduction 401K Loan 401K Loan #2 AFLAC - pretax Auto Reimbursen Dental - Fam HSA BluePreferred PP Vision - Fam	32.17 150.00 258.70 1.00	Chk Date Batch Net Dir Dep Chk Amt	Reg 11/17/2014 SM2 6154.77 6154.77 0.00 6326
Boshea Jr, David J Emp Id	32	Total Ea	Earning Regular	0.00 Hours	Rate	8333.33 Amount 350.00	Code FITW IL MED SS	Tax Federal Income T Illinois SITW Medicare OASDI	Status M-8 M-8	Taxable 350.00 350.00 350.00	1648.28 Amount 5.08	Code Code	Deduction	530.28 Amount	Type Chk Date Batch Net Dir Dep Chk Amt	Reg 11/17/2014 SM2 344.92 344.92 0.00
Boshea Jr, David J Emp Id	32	Total Ea Code KM R	Earning Earning 401k Match Regular	0.00 Hours	Rate	350.00 Amount 291.66 8333.33	Total Ta	Tax Federal Income T Illinois SITW Medicare OASDI	Status M-8 M-8	Taxable 7444.72 7444.72 7778.05	1098.68 336.82	Code 401K 401KL 401KL2 AFLPRE AUTO D4 HSA M-PPO4	Deduction 401K 401K Loan 401K Loan #2 AFLAC - pretax Auto Reimburser Dental - Fam HSA BluePreferred PP		Chk/Vcr # Type Chk Date Batch Net Dir Dep Chk Amt	6327 Reg 12/02/2014 SM1 5921.44 5921.44 0.00 6509
Boshea Jr, David J Emp Id	32	Total Ea	arnings Earning Regular	0.00 Hours	Rate	8333.33 Amount 350.00	Total Ta	Tax Federal Income T Illinois SITW Medicare OASDI	Status M-8 M-8	Taxable 350.00 350.00 350.00	1548.28 Amount	V4 Total Ded	Vision - Fam	1.00 863.61 Amount	Chk Date Batch Net Dir Dep	Reg 12/02/2014 SM1 344.93 344.93
		Total Ea	rnings	0.00		350.00	Total Ta	xes			5.07	Total Ded	luctions	0.00	Chk Amt Chk/Vcr #	0.00 6510

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Run Date: Run Time:

Payroll	Regi	ister						Compass N	Iarketir ny (175583)	ng Inc		Check Date: Process: Period:	01/02/2013 to 2013010201 12/16/2012 to	1901 31 20		
Boshea Jr, David J Emp Id	32	Code KM R	Earning 401k Match Regular	Hours	Rate	Amount 291.66 8333.33	FITW	Tax Federal Income T Illinois SITW Medicare OASDI	M-8 M-8	Taxable 7444.72 7444.72 7778.05	Amount 1098.68 336.82 112.78	401K 401KL	Deduction  401K  401K Loan  401K Loan #2  AFLAC - pretax  Auto Reimbursen  Dental - Fam  HSA  BluePreferred PP  Vision - Fam	Amount 333.33 75.00 150.00 113.41 -250.00 32.17 150.00 258.70 1.00	Chk Date Batch Net Dir Dep Chk Amt	Reg 12/16/2014 SM2 5921.44 5921.44 0.00 6571
		Total E	arnings	0.00	7.5	8333.33	Total Ta	axes	5	7.7.4	1548.28	Total Dec	luctions	863.61		
Boshea Jr, David J Emp Id	32	Code R	Earning Regular	Hours	Rate	350.00	Code FITW IL MED SS	Tax Federal Income T Illinois SITW Medicare OASDI	M-8 M-8	Taxable 350.00 350.00 350.00	Amount 5.08	Code	Deduction	Amount	Type Chk Date Batch Net Dir Dep Chk Amt	Reg 12/16/2014 SM2 344.92 344.92 0.00
		Total E	arnings	0.00		350.00	Total Ta	axes			5.08	Total Ded	luctions	0.00	Chk/Vcr#	6572
Boshea Jr, David J Emp Id	32	Code KM R	Earning 401k Match Regular	Hours	Rate	291.66 8333.33	FITW	Tax Federal Income T Illinois SITW Medicare OASDI	M-8 M-8	Taxable 7736.59 7736.59 8069.92 8069.92	Amount 1160.71 263.25 117.01 500.34		Deduction  401K  401K Loan  401K Loan #2  AFLAC - pretax  Auto Reimbursen  HSA	Amount 333.33 75.00 150.00 113.41 -250.00 150.00	Type Chk Date Batch Net Dir Dep Chk Amt Chk/Vcr #	Reg 01/02/2015 SM1 5720.28 5720.28 0.00 6701
a Post					T.L.				5.5	2.0					2.9	1.2
Boshea Jr, David J Emp Id	32	Code R	Earning Regular	Hours	Rate	350.00	Code FITW IL MED SS	Tax Federal Income T Illinois SITW Medicare OASDI	M-8 M-8	Taxable 350.00 350.00 350.00 350.00	5.08 21.70	Code	Deduction	Amount	Type Chk Date Batch Net Dir Dep Chk Amt	Reg 01/02/2015 SM1 323.22 323.22 0.00
		Total E	arnings	0.00		350.00	Total Ta	axes			26.78	Total Dec	luctions	0.00	Chk/Vcr#	6702

Payroll	Regi	ster						Compass N	Iarketin y (175583)	ng Inc			Check Date: 01/02/2013 to Process: 2013010201 Period: 12/16/2012 to			01 31
Boshea Jr, David J Emp Id	32	Code HSA KM R	Earning HSA - Employer 401k Match Regular	Hours	Rate	Amount 2600.00 291.66 8333.33	FITW IL	Tax Federal Income T Illinois SITW Medicare OASDI	Status M-8 M-8	Taxable 7142.05 7142.05 7475.38 7475.38	Amount 1012.08 240.95 108.39 463.47	401K 401KL	Deduction 401K 401K Loan 401K Loan #2 AFLAC - pretax Auto Reimbursen Dental - Fam Dental - Fam HSA BluePreferred PP Vision - Fam Vision - Fam	150.00 113.41 -250.00	Chk Date Batch	Reg 01/16/2015 SM2 5342.16 5342.16 0.00 6826
		Total Ea	rnings	0.00	7, 7	8333.33	Total Ta	ixes			1824.89	Total Dec	uctions	1166.28		
Boshea Jr, David J Emp Id	32	Code R	Earning Regular	Hours	Rate	Amount 350.00	Code FITW IL MED SS	Tax Federal Income T Illinois SITW Medicare OASDI	M-8 M-8	Taxable 350.00 350.00 350.00 350.00	5.08 21.70	Code Total Dec	Deduction	Amount 0.00	Type Chk Date Batch Net Dir Dep Chk Amt Chk/Vcr#	Reg 01/16/2015 SM2 323.22 323.22 0.00 6827
Boshea Jr,		Code	Earning	Hours	Rate	Amount		Tax	Status	Taxable	Amount		Deduction	Amount		Reg
David J Emp Id	32	KM R	401k Match Regular		Tulk	291.66 8333.33	FITW IL MED SS	Federal Income T Illinois SITW Medicare OASDI		7439.32 7439.32 7772.65 7772.65	1086.39 252.10 112.70 481.90	401K 401KL 401KL2 AFLPRE AUTO D4 HSA M-PPO4 V4	401K 401K Loan 401K Loan #2 AFLAC - pretax Auto Reimbursen Dental - Fam HSA BluePreferred PP Vision - Fam	333.33 75.00 150.00 113.41 -250.00 36.43 150.00 259.84 1.00	Chk Date Batch Net Dir Dep	02/02/2015 SM1 5531.23 5531.23 0.00 6969
		Total Ea	rnings	0.00		8333.33	Total Ta	ixes			1933.09	Total Ded	uctions	869.01		
Boshea Jr, David J Emp Id	32	Code R	Earning Regular	Hours	Rate	Amount 350.00	Code FITW IL MED SS	Tax Federal Income T Illinois SITW Medicare OASDI	Status M-8 M-8	Taxable 350.00 350.00 350.00 350.00	5.08 21.70	Code	Deduction	Amount	Type Chk Date Batch Net Dir Dep Chk Amt	Reg 02/02/2015 SM1 323.22 323.22 0.00
		Total Ea	rnings	0.00		350.00	Total Ta	ixes			26.78	Total Dec	uctions	0.00	Chk/Vcr#	6970

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Employee

Payroll	Regi	ster						Compass N	Iarketin y (175583)	g Inc			Check Date: Process: Period:	01/02/2013 to 2013010201 12/16/2012 to	901 31	
Boshea Jr,		Code	Earning	Hours	Rate	Amount		Tax	Status	Taxable	Amount		Deduction	Amount		Reg
David J		KM	401k Match			291.66	FITW	Federal Income T		7439.32	1086.39	401K	401K	333.33	Chk Date	02/17/2015
Emp Id	32	R	Regular			8333.33	IL	Illinois SITW	M-8	7439.32	252.10		401K Loan	75.00	Batch	SM2
							MED	Medicare		7772.65	112.70	401KL2	401K Loan #2	150.00		5531.22
							SS	OASDI		7772.65	481.91	AFLPRE	AFLAC - pretax		Dir Dep	5531.22
												AUTO D4	Auto Reimbursen Dental - Fam	-250.00 36.43		0.00 7091
												HSA.	HSA	150.00	Chk/VCI#	7091
												M-PPO4	BluePreferred PP	259.84		
												V4	Vision - Fam	1.00		
		Total Ea	rnings	0.00	7.7	8333.33	Total Ta	ixes			1933.10	Total Ded	luctions	869.01		
Boshea Jr,		Code	Earning	Hours	Rate	Amount	Code	Tax	Status	Taxable	Amount	Code	Deduction	Amount	Type	Reg
David J		R	Regular			350.00	FITW	Federal Income T		350.00					Chk Date	02/17/2015
Emp Id	32						IL	Illinois SITW	M-8	350.00					Batch	SM2
							MED	Medicare		350.00	5.07				Net	323.23
							SS	OASDI		350.00	21.70				Dir Dep Chk Amt	323.23 0.00
		Total Ea	rnings	0.00		350.00	Total Ta	ixes		-	26.77	Total Ded	luctions	0.00		7092
Boshea Jr,		Code	Earning	Hours	Rate	Amount	Code	Tax	Status	Taxable	Amount	Code	Deduction	Amount	Type	Reg
David J		KM	401k Match			333.33	FITW	Federal Income T	M-8	7355.98	1065.56	401K	401K	416.67	Chk Date	03/02/2015
Emp Id	32	R	Regular			8333.33	IL	Illinois SITW	M-8	7355.98	248.97	401KL	401K Loan	75.00	Batch	SM1
							MED	Medicare		7772.65	112.71	401KL2	401K Loan #2	150.00		5471.84
							SS	OASDI		7772.65	481.90	AFLPRE	AFLAC - pretax		Dir Dep	5471.84
												AUTO	Auto Reimbursen	-250.00	Chk Amt	0.00
												D4	Dental - Fam		Chk/Vcr#	7222
												HSA M-PPO4	HSA BluePreferred PP	150.00 259.84		
												W-PPO4 V4	Vision - Fam	1.00		
		Total Ea	rnings	0.00		8333.33	Total Ta	ixes			1909.14	Total Ded		952.35		
Boshea Jr,		Code	Earning	Hours	Rate	Amount	Code	Tax	Status	Taxable	Amount	Code	Deduction	Amount	Туре	Reg
David J		R	Regular			350.00	FITW	Federal Income T	M-8	350.00		-			Chk Date	03/02/2015
Emp Id	32						IL	Illinois SITW	M-8	350.00					Batch	SM1
							MED	Medicare		350.00	5.07				Net	323.23
							SS	OASDI		350.00	21.70				Dir Dep	323.23
		T . 1 T		0.00		350.00	T . 1 T	11.1			26.55	TAIR	and an area	0.00	Chk Amt	0.00
		Total Ea	rnings	0.00		350.00	Total Ta	axes			26.77	Total Ded	испоиз	0.00	Chk/Vcr#	7223

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10/22/20 01:42 PM

Payroll	Payroll Register							Compass N	Iarketin y (175583)	g Inc			Check Date: Process: Period:	01/02/2013 to 2013010201 12/16/2012 to	001 31	
Boshea Jr, David J Emp Id	32	Code KM R	Earning 401k Match Regular	Hours	Rate	Amount 333.33 8333.33	Code FITW IL MED SS	Tax Federal Income T Illinois SITW Medicare OASDI	Status M-8 M-8	Taxable 7355.98 7355.98 7772.65 7772.65	Amount 1065.56 248.97 112.71 481.91	Code 401K 401KL 401KL2 AFLPRE AUTO D4 HSA M-PPO4 V4	Deduction 401K 401K Loan 401K Loan #2 AFLAC - pretax Auto Reimbursen Dental - Fam HSA BluePreferred PP Vision - Fam	Amount 416.67 75.00 150.00 113.41 -250.00 36.43 150.00 259.84 1.00	Chk Date Batch Net Dir Dep Chk Amt	Reg 03/16/2015 SM2 5471.83 5471.83 0.00 7346
		Total Ea	rnings	0.00		8333.33	Total Ta	ixes			1909.15	Total Ded	luctions	952.35		
Boshea Jr,		Code	Earning	Hours	Rate	Amount	Code	Tax	Status	Taxable	Amount	Code	Deduction	Amount	Type	Reg
David J Emp Id	32	R	Regular			350.00	FITW IL MED SS	Federal Income T Illinois SITW Medicare OASDI	M-8 M-8	350.00 350.00 350.00 350.00	5.07 21.70				Chk Date Batch Net Dir Dep Chk Amt	03/16/2015 SM2 323.23 323.23 0.00
		Total Ea	rnings	0.00		350.00	Total Ta	ixes			26.77	Total Ded	luctions	0.00	Chk/Vcr#	7347
Boshea Jr,		Code	Earning	Hours	Rate	Amount	Code	Tax	Status	Taxable	Amount	Code	Deduction	Amount	Type	Reg
David J Emp Id	32	KM R	401k Match Regular			333.33 8333.33	FITW IL MED SS	Federal Income T Illinois SITW Medicare OASDI	M-8 M-8	7355.98 7355.98 7772.65 7772.65	1065.56 248.97 112.70 481.90	401K 401KL 401KL2 AFLPRE AUTO D4 HSA M-PPO4 V4	401K 401K Loan 401K Loan #2 AFLAC - pretax Auto Reimbursen Dental - Fam HSA BluePreferred PP Vision - Fam	150.00 259.84 1.00	Chk Date Batch Net Dir Dep Chk Amt Chk/Ver #	04/01/2015 SM1 5471.85 5471.85 0.00 7474
		Total Ea	rnings	0.00		8333.33	Total Ta	ixes			1909.13	Total Ded	luctions	952.35		
Boshea Jr, David J Emp Id	32	Code R	Earning Regular	Hours	Rate	Amount 350.00	Code FITW IL MED SS	Tax Federal Income T Illinois SITW Medicare OASDI	M-8 M-8	Taxable 350.00 350.00 350.00 350.00	5.08 21.70	Code	Deduction	Amount	Type Chk Date Batch Net Dir Dep Chk Amt	Reg 04/01/2015 SM1 323.22 323.22 0.00
		Total Ea	rnings	0.00		350.00	Total Ta	ixes			26.78	Total Ded	luctions	0.00	Chk/Vcr#	7475

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Employee

Payroll	Regi	ster						Compass N	larketin y (175583)	g Inc			Check Date: Process: Period:	01/02/2013 to 2013010201 12/16/2012 to	901 31	
Boshea Jr, David J Emp Id	32	Code KM R	Earning 401k Match Regular	Hours	Rate	Amount 333.33 8333.33	Code FITW IL MED SS	Tax Federal Income T Illinois SITW Medicare OASDI	Status M-8 M-8	Taxable 7355.98 7355.98 7772.65 7772.65	Amount 1065.56 248.97 112.70 481.90	401K 401KL 401KL2	Deduction 401K 401K Loan 401K Loan #2 AFLAC - pretax Auto Reimbursen Dental - Fam HSA BluePreferred PP Vision - Fam	150.00 113.41	Chk Date Batch Net Dir Dep Chk Amt	Reg 04/16/2015 SM2 5471.85 5471.85 0.00 7602
		Total Ea	rnings	0.00	7.7	8333.33	Total Ta	ixes			1909.13	Total Ded	luctions	952.35		
Boshea Jr,		Code	Earning	Hours	Rate	Amount	Code	Tax	Status	Taxable	Amount	Code	Deduction	Amount	Type	Reg
David J Emp Id	32	R	Regular			350.00	FITW IL MED SS	Federal Income T Illinois SITW Medicare OASDI	M-8 M-8	350.00 350.00 350.00 350.00	5.08 21.70				Chk Date Batch Net Dir Dep Chk Amt	04/16/2015 SM2 323.22 323.22 0.00
		Total Ea	rnings	0.00		350.00	Total Ta	ixes			26.78	Total Ded	luctions	0.00	Chk/Vcr#	7603
Boshea Jr,		Code	Earning	Hours	Rate	Amount	Code	Tax	Status	Taxable	Amount	Code	Deduction	Amount	Type	Reg
David J Emp Id	32	KM R	401k Match Regular			333.33 8333.33	FITW IL MED SS	Federal Income T Illinois SITW Medicare OASDI	M-8 M-8	7355.98 7355.98 7772.65 7772.65	481.91	AFLPRE AUTO D4 HSA M-PPO4 V4	401K 401K Loan 401K Loan #2 AFLAC - pretax Auto Reimbursen Dental - Fam HSA BluePreferred PP Vision - Fam	150.00 259.84 1.00	Chk Date Batch Net Dir Dep Chk Amt Chk/Vcr #	05/01/2015 SM1 5471.84 5471.84 0.00 7738
		Total Ea	rnings	0.00		8333.33	Total Ta	ixes			1909.14	Total Ded	luctions	952.35		
Boshea Jr, David J Emp Id	32	Code R	Earning Regular	Hours	Rate	Amount 350.00	Code FITW IL MED SS	Tax Federal Income T Illinois SITW Medicare OASDI	M-8 M-8	Taxable 350.00 350.00 350.00 350.00	5.08 21.70	Code	Deduction	Amount	Type Chk Date Batch Net Dir Dep Chk Amt	Reg 05/01/2015 SM1 323.22 323.22 0.00
		Total Ea	rnings	0.00		350.00	Total Ta	ixes			26.78	Total Ded	luctions	0.00	Chk/Vcr#	7739

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10/22/20 01:42 PM

Payroll	Regi	ster						Compass N	Iarketin y (175583)	g Inc			Check Date: Process: Period:	01/02/2013 to 2013010201 12/16/2012 to	to 20201019	01 31
Boshea Jr,		Code	Earning	Hours	Rate	Amount		Tax	Status	Taxable	Amount		Deduction	Amount		Reg
David J	22	KM	401k Match			333.33	FITW	Federal Income T		7355.98	1065.56	401K	401K	416.67	Chk Date	05/18/2015
Emp Id	32	R	Regular			8333.33		Illinois SITW	M-8	7355.98	248.97	401KL	401K Loan	75.00	Batch	SM2
							MED SS	Medicare OASDI		7772.65 7772.65	112.70	401KL2 AFLPRE	401K Loan #2	150.00		5471.85
							22	UASDI		1112.03	481.90	AUTO	AFLAC - pretax Auto Reimbursen	-250.00	Dir Dep Chk Amt	5471.85 0.00
												D4	Dental - Fam		Chk/Vcr#	7866
												HSA	HSA	150.00	CIIK VCI #	7000
												M-PPO4	BluePreferred PP	259.84		
												V4	Vision - Fam	1.00		
		Total Ea	rnings	0.00	7.7	8333.33	Total Ta	ixes			1909.13	Total Ded	luctions	952.35		
Boshea Jr,		Code	Earning	Hours	Rate	Amount	Code	Tax	Status	Taxable	Amount	Code	Deduction	Amount	Type	Reg
David J		R	Regular			350.00	FITW	Federal Income T		350.00					Chk Date	05/18/2015
Emp Id	32						IL	Illinois SITW	M-8	350.00					Batch	SM2
							MED	Medicare		350.00	5.07				Net	323.23
							SS	OASDI		350.00	21.70				Dir Dep	323.23
		Total Ea	rminas	0.00		350.00	Total Ta	TOC		10.1	26.77	Total Ded	luctions	0.00	Chk Amt Chk/Vcr #	0.00 7867
									6							
Boshea Jr, David J		Code KM	Earning 401k Match	Hours	Rate	333.33	Code	Tax Federal Income T	Status	Taxable 7355.98	Amount 1065.56	Code 401K	Deduction 401K	416.67	Type Chk Date	Reg 06/01/2015
Emp Id	32	R	Regular			8333.33	IL.	Illinois SITW	M-8	7355.98	248.97	401KL	401K Loan	75.00	Batch	SM1
Emp Id	32	K	Regulai			6333.33	MED	Medicare	IVI-0	7772.65	112.71	401KL2	401K Loan #2	150.00		5471.83
							SS	OASDI		7772.65	222115	AFLPRE	AFLAC - pretax		Dir Dep	5471.83
							55	OASDI		1112.05	401.71	AUTO	Auto Reimbursen	-250.00	Chk Amt	0.00
												D4	Dental - Fam	TEX. 115 C	Chk/Vcr#	8000
												HSA	HSA	150.00	CIAL VCI II	3000
												M-PPO4	BluePreferred PP	259.84		
												V4	Vision - Fam	1.00		
		Total Ea	rnings	0.00		8333.33	Total Ta	ixes			1909.15	Total Ded	luctions	952.35		
Boshea Jr,		Code	Earning	Hours	Rate	Amount		Tax	Status	Taxable	Amount	Code	Deduction	Amount		Reg
David J	44	R	Regular			350.00	FITW	Federal Income T		350.00					Chk Date	06/01/2015
Emp Id	32						IL	Illinois SITW	M-8	350.00					Batch	SM1
							MED	Medicare		350.00	5.07				Net	323.23
							SS	OASDI		350.00	21.70				Dir Dep	323.23
		Tatal F		0.00		250.00	Total Ta				26 77	Total Ded		0.00	Chk Amt	0.00
		Total Ea	rnings	0.00		350.00	Total 12	ixes			26.77	Total Ded	ucuons	0.00	Chk/Vcr#	8001

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Employee

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Payroll	Regi	ster						Compass N	Iarketin y (175583)	g Inc			Check Date: Process: Period:	01/02/2013 to 2013010201 12/16/2012 to	to 202010190	
Boshea Jr, David J		Code KM	Earning 401k Match	Hours	Rate	Amount 333.33	FITW	Tax Federal Income T		Taxable 7355.98	Amount 1065.56	401K	Deduction 401K	Amount 416.67	Chk Date	Reg 06/16/2015
Emp Id	32	R	Regular			8333.33	IL MED SS	Illinois SITW Medicare OASDI	M-8	7355.98 7772.65 7772.65	248.97 112.71 481.90	401KL2	401K Loan 401K Loan #2 AFLAC - pretax Auto Reimbursen Dental - Fam HSA BluePreferred PP Vision - Fam	75.00 150.00 113.41 -250.00 36.43 150.00 259.84 1.00	Dir Dep Chk Amt	SM2 5471.84 5471.84 0.00 8127
		Total Ea	rnings	0.00		8333.33	Total Ta	ixes			1909.14	Total Ded	100000000000000000000000000000000000000	952.35		
Boshea Jr,		Code	Earning	Hours	Rate	Amount	Code	Tax	Status	Taxable	Amount	Code	Deduction	Amount	Type	Reg
David J Emp Id	32	R	Regular			350.00	FITW IL MED SS	Federal Income T Illinois SITW Medicare OASDI	100,000,000	350.00 350.00 350.00 350.00	5.07 21.70				Chk Date Batch Net Dir Dep Chk Amt	06/16/2015 SM2 323.23 323.23 0.00
		Total Ea	rnings	0.00		350.00	Total Ta	ixes			26.77	Total Ded	luctions	0.00	Chk/Vcr#	8128
Boshea Jr,		Code	Earning	Hours	Rate	Amount	Code	Tax	Status	Taxable	Amount		Deduction	Amount	Type	Reg
David J Emp Id	32	KM R	401k Match Regular			333.33 8333.33	FITW IL MED SS	Federal Income T Illinois SITW Medicare OASDI	M-8 M-8	7355.98 7355.98 7772.65 7772.65		AFLPRE AUTO D4 HSA M-PPO4 V4	401K 401K Loan 401K Loan #2 AFLAC - pretax Auto Reimbursen Dental - Fam HSA BluePreferred PP Vision - Fam	-250.00 36.43 150.00 259.84 1.00	Chk Date Batch Net Dir Dep Chk Amt Chk/Vcr #	07/01/2015 SM1 5471.84 5471.84 0.00 8262
		Total Ea		0.00		8333.33					1909.14	Total Ded		952.35		
Boshea Jr, David J Emp Id	32	Code R	Earning Regular	Hours	Rate	Amount 350.00	Code FITW IL MED SS	Tax Federal Income T Illinois SITW Medicare OASDI	M-8 M-8	Taxable 350.00 350.00 350.00 350.00	5.08 21.70	Code	Deduction	Amount	Type Chk Date Batch Net Dir Dep Chk Amt	Reg 07/01/2015 SM1 323.22 323.22 0.00
		Total Ea	rnings	0.00		350.00	Total Ta	ixes			26.78	Total Ded	luctions	0.00	Chk/Vcr#	8263

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Employee

Paghol0369

Payroll	Regi	ster						Compass N	Iarketin y (175583)	ng Inc			Check Date: Process: Period:	01/02/2013 to 2013010201 12/16/2012 to	to 202010190	01 31
Boshea Jr, David J Emp Id	32	Code KM R	Earning 401k Match Regular	Hours	Rate	Amount 333.33 8333.33	Code FITW IL MED SS	Tax Federal Income T Illinois SITW Medicare OASDI	Status M-8 M-8	Taxable 7355.98 7355.98 7772.65 7772.65	Amount 1065.56 248.97 112.70 481.90	401K 401KL 401KL2	Deduction 401K 401K Loan #2 AFLAC - pretax Auto Reimbursen Dental - Fam HSA BluePreferred PP Vision - Fam	Amount 416.67 75.00 150.00 113.41 -250.00 36.43 150.00 259.84 1.00	Chk Date Batch Net Dir Dep	Reg 07/16/2015 SM2 5471.85 5471.85 0.00 8392
		Total Ea	rnings	0.00	7.7	8333.33	Total Ta	ixes			1909.13	Total Ded	luctions	952.35		
Boshea Jr,		Code	Earning	Hours	Rate	Amount	Code	Tax	Status	Taxable	Amount	Code	Deduction	Amount	Туре	Reg
David J Emp Id	32	R	Regular			350.00	FITW IL MED SS	Federal Income T Illinois SITW Medicare OASDI	M-8 M-8	350.00 350.00 350.00 350.00	5.08 21.70				Chk Date Batch Net Dir Dep Chk Amt	07/16/2015 SM2 323.22 323.22 0.00
		Total Ea	rnings	0.00		350.00	Total Ta	ixes			26.78	Total Ded	luctions	0.00	Chk/Vcr#	8393
Boshea Jr,		Code	Earning	Hours	Rate	Amount	Code	Tax	Status	Taxable	Amount	Code	Deduction	Amount	Type	Reg
David J Emp Id	32	KM R	401k Match Regular			333.33 8333.33	MED SS	Federal Income T Illinois SITW Medicare OASDI	M-8 M-8	7355.98 7355.98 7772.65 4782.90		AFLPRE AUTO D4 HSA M-PPO4 V4	401K 401K Loan 401K Loan #2 AFLAC - pretax Auto Reimbursen Dental - Fam HSA BluePreferred PP Vision - Fam	150.00 259.84 1.00	Chk Date Batch Net Dir Dep Chk Amt Chk/Ver #	07/31/2015 SM1 5657.21 5657.21 0.00 8531
		Total Ea	rnings	0.00		8333.33	Total Ta	ixes			1723.77	Total Ded	luctions	952.35		
Boshea Jr, David J Emp Id	32	Code R	Earning Regular	Hours	Rate	Amount 350.00	Code FITW IL MED SS	Tax Federal Income T Illinois SITW Medicare OASDI	Status M-8 M-8	Taxable 350.00 350.00 350.00	Amount 5.08	Code	Deduction	Amount	Type Chk Date Batch Net Dir Dep Chk Amt	Reg 07/31/2015 SM1 344.92 344.92 0.00
		Total Ea	rnings	0.00		350.00	Total Ta	ixes			5.08	Total Ded	luctions	0.00	Chk/Vcr#	8532

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Employee

Pagnol0378

Payroll	Regi	ster						Compass N	Iarketin y (175583)	ng Inc			Check Date: Process: Period:	01/02/2013 to 2013010201 12/16/2012 to	to 20201019	01 319
Boshea Jr, David J Emp Id	32	Code KM R	Earning 401k Match Regular	Hours	Rate	Amount 333,33 8333,33	FITW IL	Tax Federal Income T Illinois SITW	Status M-8 M-8	Taxable 7355.98 7355.98	Amount 1065.56 248.97	401K 401KL	Deduction 401K 401K Loan	Amount 416.67 75.00	Chk Date Batch	Reg 08/17/2015 SM2
							MED SS	Medicare OASDI		7772.65	112.70	401KL2 AFLPRE AUTO D4 HSA M-PPO4 V4	401K Loan #2 AFLAC - pretax Auto Reimbursen Dental - Fam HSA BluePreferred PP Vision - Fam	150.00 113.41 -250.00 36.43 150.00 259.84 1.00	Dir Dep Chk Amt	5953.75 5953.75 0.00 8669
		Total Ea	rnings	0.00		8333.33	Total Ta	ixes			1427.23	Total Ded	uctions	952.35		
Boshea Jr,		Code	Earning	Hours	Rate	Amount	Code	Tax	Status	Taxable	Amount	Code	Deduction	Amount	Туре	Reg
David J Emp Id	32	R	Regular			350.00	FITW IL MED SS	Federal Income T Illinois SITW Medicare OASDI	M-8 M-8	350.00 350.00 350.00	5.07				Chk Date Batch Net Dir Dep Chk Amt	08/17/2015 SM2 344.93 344.93 0.00
		Total Ea	rnings	0.00		350.00	Total Ta	ixes			5.07	Total Ded	uctions	0.00	Chk/Vcr#	8670
Boshea Jr,		Code	Earning	Hours	Rate	Amount		Tax	Status	Taxable	Amount	Code	Deduction	Amount	Type	Reg
David J Emp Id	32	KM R	401k Match Regular			333.33 8333.33	MED SS	Federal Income T Illinois SITW Medicare OASDI	M-8 M-8	7105.98 7105.98 7772.65		401K 401KL 401KL2 AFLPRE AUTO D4 HSA M-PPO4 V4	401K 401K Loan 401K Loan #2 AFLAC - pretax Auto Reimbursen Dental - Fam HSA BluePreferred PP Vision - Fam	-250.00 36.43 150.00 259.84 1.00	Dir Dep	09/01/2015 SM1 5775.61 5775.61 0.00 8800
		Total Ea	rnings	0.00		8333.33	Total Ta	ixes			1355.37	Total Ded	uctions	1202.35		
Boshea Jr, David J Emp Id	32	Code R	Earning Regular	Hours	Rate	Amount 350.00	Code FITW IL MED SS	Tax Federal Income T Illinois SITW Medicare OASDI	M-8 M-8	Taxable 350.00 350.00 350.00	Amount 5.07	Code	Deduction	Amount	Type Chk Date Batch Net Dir Dep Chk Amt	Reg 09/01/2015 SM1 344.93 344.93 0.00
		Total Ea	rnings	0.00		350.00	Total Ta	ixes			5.07	Total Dec	uctions	0.00	Chk/Vcr#	8801

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Boshea Jr

Employee

Payroll I	Regi	ster						Compass N	Iarketir y (175583)	ng Inc			Check Date: Process: Period:	01/02/2013 to 2013010201 12/16/2012 to	to 202010190	
Boshea Jr,		Code	Earning	Hours	Rate	Amount		Tax	Status	Taxable	Amount		Deduction	Amount		Reg
David J Emp Id	32	KM R	401k Match Regular			333.33 8333.33	FITW IL MED SS	Federal Income T Illinois SITW Medicare OASDI	M-8 M-8	6772.65 6772.65 7772.65	919.72 227.10 112.71	401K 401KL 401KL2 AFLPRE AUTO D4 HSA M-PPO4 V4	401K Loan 401K Loan #2 AFLAC - pretax Auto Reimburser Dental - Fam HSA BluePreferred PP	-250.00 36.43 150.00 259.84	Batch Net Dir Dep Chk Amt	09/16/2015 SM2 5538.12 5538.12 0.00 8928
		Total Ea	rnings	0.00		8333.33	Total Ta	ixes			1259.53	Total Ded	Vision - Fam uctions	1.00		
Boshea Jr,		Code	Earning	Hours	Rate	Amount	Code	Tax	Status	Taxable			Deduction	Amount	Type	Reg
David J	32	R	Regular			350.00	FITW IL MED SS	Federal Income T Illinois SITW Medicare OASDI	M-8 M-8	350.00 350.00 350.00	5.07				Chk Date Batch Net Dir Dep Chk Amt	09/17/2015 ADJ 344.93 344.93 0.00
		Total Ea	rnings	0.00		350.00	Total Ta	ixes			5.07	<b>Total Ded</b>	uctions	0.00	Chk/Vcr#	9050
Boshea Jr, David J Emp Id Salary 7500	32 .00	Code KM R	Earning 401k Match Regular	Hours	Rate	Amount 300.00 7500.00	Code FITW IL MED SS	Tax  Federal Income T Illinois SITW Medicare OASDI	M-8 M-8	Taxable 6039.32 6039.32 6939.32	Amount 736.39 199.60 100.62	Code 401K 401KL 401KL2 AFLPRE AUTO D4 HSA M-PPO4 V4 Total Ded	Deduction  401K  401K Loan  401K Loan #2  AFLAC - pretax  Auto Reimburser  Dental - Fam  HSA  BluePreferred PP  Vision - Fam	-250.00	Type Chk Date Batch Net Dir Dep Chk Amt Chk/Vcr #	Reg 10/01/2015 SM1 5027.71 5027.71 0.00 9065
الألام ي					70					700000	43.3	A 100 A	25.50			_
Boshea Jr, David J Emp Id Salary 7500	32	Code R	Earning Regular	Hours	Rate	Amount 350.00	FITW IL MED SS	Tax Federal Income T Illinois SITW Medicare OASDI	M-8 M-8	Taxable 350.00 350.00 350.00	Amount 5.08	Code	Deduction	Amount	Type Chk Date Batch Net Dir Dep Chk Amt	Reg 10/01/2015 SM1 344.92 344.92 0.00
		Total Ea	rnings	0.00		350.00	Total Ta	ixes			5.08	Total Ded	uctions	0.00	Chk/Vcr#	9066

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Employee

Pagnol0322

Payroll Regis	ster						Compass N	Iarketin y (175583)	ng Inc			Check Date: Process: Period:	01/02/2013 to 2013010201 12/16/2012 to	to 20201019	01 32
Boshea Jr, David J Emp Id 32 Salary 7500.00	Code KM R	Earning 401k Match Regular	Hours	Rate	Amount 300.00 7500.00	Code FITW IL MED SS	Tax  Federal Income T Illinois SITW Medicare OASDI	M-8 M-8 M-8	Taxable 6039.32 6039.32 6939.32	Amount 736.39 199.60 100.62	401K 401KL 401KL2 AFLPRE AUTO D4 HSA M-PPO4 V4	Deduction 401K 401K Loan #2 AFLAC - pretax Auto Reimbursen Dental - Fam HSA BluePreferred PP Vision - Fam	Amount 900.00 75.00 150.00 113.41 -250.00 36.43 150.00 259.84 1.00	Chk Date Batch	Reg 10/16/2015 SM2 5027.71 5027.71 0.00 9192
	Total E	arnings	0.00	7.65	7500.00	Total Ta	ixes	X		1036.61	Total Ded	luctions	1435.68		
Boshea Jr, David J Emp Id 32 Salary 7500.00	Code R	Earning Regular	Hours	Rate	Amount 350.00	FITW IL MED SS	Tax Federal Income T Illinois SITW Medicare OASDI	M-8 M-8	Taxable 350.00 350.00 350.00	Amount 5.07	Code	Deduction	Amount	Type Chk Date Batch Net Dir Dep Chk Amt	Reg 10/16/2015 SM2 344.93 344.93 0.00
	Total E	arnings	0.00		350.00	Total Ta	ixes			5.07	Total Ded	luctions	0.00	Chk/Vcr#	9193
Boshea Jr, David J Emp Id 32 Salary 7500.00	Code KM R	Earning 401k Match Regular	Hours	Rate	Amount 300.00 7500.00	Code FITW IL MED SS	Tax Federal Income T Illinois SITW Medicare OASDI	M-8 M-8	Taxable 6039.32 6039.32 6939.32	Amount 736.39 199.60 100.62	Code 401K 401KL 401KL2 AFLPRE AUTO D4 HSA M-PPO4 V4	Deduction  401K  401K Loan  401K Loan #2  AFLAC - pretax  Auto Reimbursen  Dental - Fam  HSA  BluePreferred PP  Vision - Fam	Amount 900.00 270.00 150.00 113.41 -250.00 36.43 150.00 259.84 1.00	Type Chk Date Batch Net Dir Dep Chk Amt Chk/Vcr #	Reg 11/02/2015 SM1 4832.71 4832.71 0.00 9331
	Total E	arnings	0.00		7500.00	Total Ta	ixes			1036.61	Total Ded	luctions	1630.68		
Boshea Jr, David J Emp Id 32 Salary 7500.00	Code R	Earning Regular	Hours	Rate	Amount 350.00	Code FITW IL MED SS	Tax Federal Income T Illinois SITW Medicare OASDI	M-8 M-8	Taxable 350.00 350.00 350.00	Amount 5.08	Code	Deduction	Amount	Type Chk Date Batch Net Dir Dep Chk Amt	Reg 11/02/2015 SM1 344.92 344.92 0.00
	Total E	arnings	0.00	100	350.00	Total Ta	ixes		20.00	5.08	Total Ded	luctions	0.00	Chk/Vcr#	9332
Boshea Jr, David J Emp Id 32 Salary 7500.00	Code R	Earning Regular	Hours	Rate	Amount 3455.00	Code FITW IL MED SS	Tax Federal Income T Illinois SITW Medicare OASDI	M-8 M-8	Taxable 3455.00 3455.00 3455.00	Amount 226.06 102.69 50.09	Code	Deduction	Amount	Type Chk Date Batch Net Dir Dep Chk Amt	Reg 11/02/2015 SM1 3076.16 3076.16 0.00
	Total E	arnings	0.00		3455.00	Total Ta	ixes			378.84	Total Ded	luctions	0.00	Chk/Vcr#	9333

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Employee

Paghol0323

Payroll Regi	ster						Compass N	Iarketin ny (175583)	g Inc			Check Date: Process: Period:	01/02/2013 to 2013010201 12/16/2012 to	to 202010190	
Boshea Jr, David J Emp Id 32 Salary 7500.00	Code KM R	Earning 401k Match Regular	Hours	Rate	Amount 300.00 7500.00	Code FITW IL MED SS	Tax Federal Income T Illinois SITW Medicare OASDI	Status M-8 M-8	Taxable 6039.32 6039.32 6939.32	Amount 736.39 199.60 100.62	Code 401K 401KL 401KL2 AFLPRE AUTO D4 HSA M-PPO4 V4	Deduction  401K  401K Loan  401K Loan #2  AFLAC - pretax  Auto Reimbursen  Dental - Fam  HSA  BluePreferred PP  Vision - Fam	Amount 900.00 270.00 150.00 113.41 -250.00 36.43 150.00 259.84 1.00	Chk Date Batch Net Dir Dep	Reg 11/16/2015 SM2 4832.71 4832.71 0.00 9463
	Total Ea	arnings	0.00		7500.00	Total Ta	ixes			1036.61	Total Ded		1630.68		
Boshea Jr, David J Emp Id 32 Salary 7500.00	Code R	Earning Regular	Hours	Rate	Amount 350.00	Code FITW IL MED SS	Tax Federal Income T Illinois SITW Medicare OASDI	Status M-8 M-8	Taxable 350.00 350.00 350.00	Amount 5.08	Code	Deduction	Amount	Type Chk Date Batch Net Dir Dep Chk Amt	Reg 11/16/2015 SM2 344.92 344.92 0.00
	Total Ea	arnings	0.00		350.00	Total Ta	ixes			5.08	Total Ded	luctions	0.00	Chk/Vcr#	9464
Boshea Jr, David J Emp Id 32 Salary 7500.00	Code KM R	Earning 401k Match Regular	Hours	Rate	Amount 300.00 7500.00	FITW IL MED SS	Tax Federal Income T Illinois SITW Medicare OASDI	Status M-8 M-8	Taxable 6039.32 6039.32 6939.32	Amount 736.39 199.60 100.62	Code 401K 401KL 401KL2 AFLPRE AUTO D4 HSA M-PPO4 V4	Deduction 401K 401K Loan 401K Loan #2 AFLAC - pretax Auto Reimbursen Dental - Fam HSA BluePreferred PP Vision - Fam	Amount 900.00 270.00 150.00 113.41 -250.00 36.43 150.00 259.84 1.00	Chk Date Batch Net Dir Dep	Reg 12/01/2015 SM1 4832.71 4832.71 0.00 9597
			11,454	ъ.				~ .	T 11	0.32 5.50				TT.	
Boshea Jr, David J Emp Id 32 Salary 7500.00	Code R	Earning Regular	Hours	Rate	350.00	FITW IL MED SS	Tax Federal Income T Illinois SITW Medicare OASDI	M-8 M-8	Taxable 350.00 350.00 350.00	Amount 5.07	Code	Deduction	Amount	Type Chk Date Batch Net Dir Dep Chk Amt	Reg 12/01/2015 SM1 344.93 344.93 0.00
	Total Ea	arnings	0.00		350.00	Total Ta	ixes			5.07	Total Dec	luctions	0.00	Chk/Ver#	9598

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Employee

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Payroll Regi	ster						Compass N	Iarketir ny (175583)	ng Inc			Check Date: Process: Period:	01/02/2013 to 2013010201 12/16/2012 to	to 20201019	01 323
Boshea Jr, David J Emp Id 32 Salary 7500.00	Code KM R	Earning 401k Match Regular	Hours	Rate	Amount 300.00 7500.00	FITW IL MED	Tax Federal Income T Illinois SITW Medicare	Status M-8 M-8	Taxable 6039.32 6039.32 6939.32	Amount 736.39 199.60 100.62	401K 401KL 401KL2	Deduction 401K 401K Loan 401K Loan #2	Amount 900.00 270.00 150.00	Chk Date Batch Net	Reg 12/16/2015 SM2 4832.71
						SS	OASDI				AFLPRE AUTO D4 HSA M-PPO4 V4	AFLAC - pretax Auto Reimbursen Dental - Fam HSA BluePreferred PP Vision - Fam	-250.00 36.43 150.00 259.84 1.00		4832.71 0.00 9731
	Total E	arnings	0.00		7500.00	Total Ta	ixes			1036.61	Total Ded	luctions	1630.68		
Boshea Jr,	Code	Earning	Hours	Rate	Amount	Code	Tax	Status	Taxable	Amount	Code	Deduction	Amount	Type	Reg
David J Emp Id 32 Salary 7500.00	R	Regular			350.00	FITW IL MED SS	Federal Income T Illinois SITW Medicare OASDI	M-8 M-8	350.00 350.00 350.00	5.08				Chk Date Batch Net Dir Dep Chk Amt	12/16/2015 SM2 344.92 344.92 0.00
	Total E	arnings	0.00		350.00	Total Ta	ixes			5.08	Total Ded	luctions	0.00	Chk/Vcr#	9732
Boshea Jr,	Code	Earning	Hours	Rate	Amount	Code	Tax	Status	Taxable		Code	Deduction	Amount		Reg
David J Emp Id 32 Salary 7500.00	KM R	401k Match Regular			300.00 7500.00	FITW IL MED	Federal Income T Illinois SITW Medicare	M-8 M-8	6047.37 6047.37 6947.37	732.88 199.59 100.74	401K 401KL 401KL2	401K Loan 401K Loan #2	900.00 270.00 150.00		01/04/2016 SM1 4413.42
,						SS	OASDI		6947.37	430.74	AFLPRE AUTO D4 HSA M-PPO4 V4	AFLAC - pretax Auto Reimbursen Dental - Fam HSA BluePreferred PP Vision - Fam	113.41 -250.00	Dir Dep	4413.42 0.00 9867
	Total E	arnings	0.00		7500.00	Total Ta	ixes			1463.95	Total Dec	luctions	1622.63		
Boshea Jr, David J Emp Id 32 Salary 7500.00	Code R	Earning Regular	Hours	Rate	Amount 350.00	Code FITW IL MED	Tax Federal Income T Illinois SITW Medicare	M-8 M-8	Taxable 350.00 350.00 350.00	5.07	Code	Deduction	Amount	Type Chk Date Batch Net	Reg 01/04/2016 SM1 323.23
	Total E	arnings	0.00		350.00	SS Total Ta	OASDI		350.00	21.70 26.77	Total Dec	luctions	0.00	Dir Dep Chk Amt Chk/Vcr #	323.23 0.00 9868

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Employee

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Payroll Regi	ster						Compass N	Iarketin ny (175583)	ng Inc			Check Date: Process: Period:	01/02/2013 to 2013010201 12/16/2012 to	to 20201019	01 32
Boshea Jr, David J	Code HSA	Earning HSA - Employer	Hours	Rate	Amount 2800.00	FITW	Tax Federal Income T		Taxable 6572.37		401K	Deduction 401K	Amount 375.00	Chk Date	Reg 01/15/2016
Emp Id 32 Salary 7500.00	KM R	401k Match Regular			300.00 7500.00	IL MED SS	Illinois SITW Medicare OASDI	M-8	6572.37 6947.37 6947.37		401KL 401KL2 AFLPRE AUTO D4 HSA M-PPO4 V4	401K Loan 401K Loan #2 AFLAC - pretax Auto Reimbursen Dental - Fam HSA BluePreferred PP Vision - Fam	270.00 150.00 113.41 -250.00 32.00 150.00 256.22 1.00	Dir Dep	SM2 4787.49 4787.49 0.00 10002
	Total Ea	rnings	0.00		7500.00	Total Ta	ixes			1614.88	Total Ded		1097.63		
Boshea Jr,	Code	Earning	Hours	Rate	Amount	Code	Tax	Status	Taxable	Amount	Code	Deduction	Amount	Type	Reg
David J Emp Id 32 Salary 7500.00	R	Regular			350.00	FITW IL MED SS	Federal Income T Illinois SITW Medicare OASDI	M-8 M-8	350.00 350.00 350.00 350.00	5.07 21.70				Chk Date Batch Net Dir Dep Chk Amt	01/15/2016 SM2 323.23 323.23 0.00
	Total Ea	rnings	0.00		350.00	Total Ta	ixes		7.2.2	26.77	Total Ded	luctions	0.00	Chk/Vcr#	10003
Boshea Jr,	Code KM	Earning 401k Match	Hours	Rate	Amount 300.00	Code FITW	Tax	Status M-8	Taxable		Code 401K	Deduction 401K	Amount 375.00	Type Chk Date	Reg 02/01/2016
David J Emp Id 32 Salary 7500.00	R	Regular			7500.00	IL MED SS	Federal Income T Illinois SITW Medicare OASDI	M-8	6572.37 6572.37 6947.37 6947.37	430.74	401KL 401KL2 AFLPRE AUTO D4 HSA M-PPO4 V4	401K Loan 401K Loan #2 AFLAC - pretax Auto Reimbursen Dental - Fam HSA BluePreferred PP Vision - Fam	270.00 150.00 113.41 -250.00 32.00 150.00 256.22 1.00	Batch Net Dir Dep	SM1 4787.48 4787.48 0.00 10156
	Total Ea	rnings	0.00		7500.00	Total Ta	ixes			1614.89	Total Ded	luctions	1097.63		
Boshea Jr, David J Emp Id 32 Salary 7500.00	Code R	Earning Regular	Hours	Rate	Amount 350.00	Code FITW IL MED SS	Tax Federal Income T Illinois SITW Medicare OASDI	M-8 M-8	Taxable 350.00 350.00 350.00 350.00	5.08 21.70	Code	Deduction	Amount	Type Chk Date Batch Net Dir Dep Chk Amt	Reg 02/01/2016 SM1 323.22 323.22 0.00
	Total Ea	arnings	0.00		350.00	Total Ta	ixes			26.78	Total Dec	luctions	0.00	Chk/Vcr#	10157

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Payroll Regi	ister						Compass N	Iarketir y (175583)	ng Inc			Check Date: Process: Period:	01/02/2013 to 2013010201 12/16/2012 to	to 202010190	01 32
Boshea Jr, David J Emp Id 32 Salary 7500.00	Code KM R	Earning 401k Match Regular	Hours		Amount 300.00 7500.00	FITW IL MED SS	Tax Federal Income T Illinois SITW Medicare OASDI	M-8 M-8	Taxable 6722.37 6722.37 7097.37 7097.37	Amount 901.63 224.90 102.91 440.04	Code 401K 401KL 401KL2 AFLPRE AUTO D4 M-PPO4 V4	Deduction 401K 401K Loan 401K Loan #2 AFLAC - pretax Auto Reimburser Dental - Fam BluePreferred PP Vision - Fam	113.41 -250.00 32.00 256.22 1.00	Chk Date Batch Net Dir Dep	Reg 02/16/2016 SM2 4882.89 4882.89 0.00 10288
Boshea Jr, David J Emp Id 32 Salary 7500.00	Code R	arnings Earning Regular	0.00 Hours	Labora et al	7500.00 Amount 350.00	Code FITW IL MED SS	Tax Federal Income T Illinois SITW Medicare OASDI	Status M-8 M-8	Taxable 350.00 350.00 350.00 350.00	5.07 21.70	Code	Deduction	947.63 Amount	Type Chk Date Batch Net Dir Dep Chk Amt	Reg 02/16/2016 SM2 323.23 323.23 0.00
Boshea Jr, David J Emp Id 32 Salary 7500.00	Total E Code KM R	arnings Earning 401k Match Regular	0.00 Hours		350.00 Amount 300.00 7500.00	FITW	Tax Federal Income T Illinois SITW Medicare OASDI	Status M-8 M-8	Taxable 6572.37 6572.37 6947.37 6947.37	864.13 219.28	Code 401K 401KL 401KL2 AFLPRE AUTO D4 HSA	Deduction  401K 401K Loan 401K Loan #2 AFLAC - pretax Auto Reimbursen Dental - Fam HSA		Chk/Vcr#	Reg 03/01/2016 SM1 4787.49 4787.49 0.00 10390
Boshea Jr, David J Emp Id 32 Salary 7500.00	Total E Code R	arnings Earning Regular	0.00 Hours	200	7500.00 Amount 350.00	Total Ta  Code FITW IL MED SS	Tax Federal Income T Illinois SITW Medicare OASDI	Status M-8 M-8	Taxable 350.00 350.00 350.00 350.00	1614.88 Amount 5.07 21.70	M-PPO4 V4 Total Ded	BluePreferred PP Vision - Fam	256.22 1.00 1097.63 Amount	Type Chk Date Batch Net Dir Dep	Reg 03/01/2016 SM1 323.23 323.23
	Total E	arnings	0.00		350.00	Total Ta			330.00	26.77	Total Ded	luctions	0.00	Chk Amt Chk/Vcr#	0.00 10391

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Employee

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Payroll Regi	ster						Compass N	Iarketir ny (175583)	ng Inc			Check Date: Process: Period:	01/02/2013 to 2013010201 12/16/2012 to	to 20201019	01 320
Boshea Jr, David J	Code KM	Earning 401k Match	Hours	Rate	Amount 300.00	Code FITW	Tax Federal Income T	Status M-8	Taxable 6422.37	Amount 826.63	Code 401K	Deduction 401K	Amount 525.00	Type Chk Date	Reg 03/16/2016
Emp Id 32 Salary 7500.00	R	Regular			7500.00		Illinois SITW Medicare OASDI	M-8	6422.37 6947.37 6947.37	213.65 100.74	401KL 401KL2 AFLPRE AUTO D4 HSA M-PPO4	401K Loan 401K Loan #2 AFLAC - pretax Auto Reimbursen Dental - Fam HSA BluePreferred PP	270.00 150.00 113.41 -250.00 32.00 150.00 256.22	Batch	SM2 4680.61 4680.61 0.00 10524
	Total E	arnings	0.00		7500.00	Total Ta	axes			1571.76	V4 Total Ded	Vision - Fam luctions	1.00		
Boshea Jr,	Code	Earning	Hours	Rate	Amount	Code	Tax	Status	Taxable	Amount	Code	Deduction	Amount	Type	Reg
David J Emp Id 32 Salary 7500.00	KM R	401k Match Regular	0.00		300.00 7500.00	FITW	Federal Income T Illinois SITW Medicare OASDI		6422.37 6422.37 6947.37 6947.37	826.63 213.65 100.74 430.74	401K 401KL 401KL2	401K 401K Loan 401K Loan #2 AFLAC - pretax Auto Reimbursen Dental - Fam HSA BluePreferred PP Vision - Fam	525.00 270.00 150.00 113.41 -250.00 32.00 150.00 256.22 1.00	Chk Date Batch	04/01/2016 SM1 4680.61 4680.61 0.00 10664
Boshea Jr,	Code	Earning	Hours	Rate	Amount		Tax	Status	Taxable	Amount	100000000000000000000000000000000000000	Deduction	Amount	There	
David J Emp Id 32 Salary 7500.00	R	Regular	Tious	Kate	350.00	FITW IL MED SS	Federal Income T Illinois SITW Medicare OASDI		350.00 350.00 350.00 350.00	5.07 21.70	Code	Deduction	Amount	Type Chk Date Batch Net Dir Dep Chk Amt	Reg 04/01/2016 SM1 323.23 323.23 0.00
	Total E	arnings	0.00		350.00	Total Ta	ixes			26.77	Total Ded	luctions	0.00		10665
Boshea Jr, David J Emp Id 32 Salary 7500.00	Code R	Earning Regular	Hours	Rate	Amount 350.00	Code FITW IL MED SS	Tax Federal Income T Illinois SITW Medicare OASDI	M-8 M-8	Taxable 350.00 350.00 350.00 350.00	5.08 21.70	Code	Deduction	Amount	Type Chk Date Batch Net Dir Dep Chk Amt	Reg 04/01/2016 SM1 323.22 323.22 0.00
	Total E	arnings	0.00		350.00	Total Ta	ixes			26.78	Total Dec	luctions	0.00	Chk/Ver#	10666

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Employee

Payroll Regi	ster						Compass N	Iarketin y (175583)	g Inc			Check Date: Process: Period:	01/02/2013 to 2013010201 12/16/2012 to	to 202010190	01 32
Boshea Jr, David J Emp Id 32 Salary 7500.00	Code KM R	Earning 401k Match Regular	Hours	Rate	Amount 300.00 7500.00	Code FITW IL MED SS	Tax Federal Income T Illinois SITW Medicare OASDI	Status M-8 M-8	Taxable 6347.37 6347.37 6947.37 6947.37	Amount 807.88 210.84 100.73 430.74	401K	Deduction 401K 401K Loan 401K Loan #2 AFLAC - pretax Auto Reimbursen Dental - Fam HSA BluePreferred PP Vision - Fam	Amount 600.00 270.00 150.00 113.41 -250.00 32.00 150.00 256.22 1.00	Chk Date Batch Net Dir Dep	Reg 04/15/2016 SM2 4627.18 4627.18 0.00 10794
	Total Ea	arnings	0.00	7.7	7500.00	Total Ta	ixes			1550.19	Total Dec	uctions	1322.63		
Boshea Jr,	Code	Earning	Hours	Rate	Amount	Code	Tax	Status	Taxable	Amount	Code	Deduction	Amount	Type	Reg
David J Emp Id 32 Salary 7500.00	R	Regular			350.00	FITW IL MED SS	Federal Income T Illinois SITW Medicare OASDI	M-8 M-8	350.00 350.00 350.00 350.00	5.08 21.70				Chk Date Batch Net Dir Dep Chk Amt	04/15/2016 SM2 323.22 323.22 0.00
	Total Ea	arnings	0.00		350.00	Total Ta	ixes			26.78	Total Ded	uctions	0.00	Chk/Vcr#	10795
Boshea Jr,	Code	Earning	Hours	Rate	Amount	Code	Tax	Status	Taxable	Amount	Code	Deduction	Amount	Type	Reg
David J Emp Id 32 Salary 7500.00	KM R	401k Match Regular			300.00 7500.00	FITW IL MED SS	Federal Income T Illinois SITW Medicare OASDI	M-8 M-8	6272.37 6272.37 6947.37 6947.37	430.73	401K 401KL 401KL2 AFLPRE AUTO D4 HSA M-PPO4 V4	401K 401K Loan 401K Loan #2 AFLAC - pretax Auto Reimbursen Dental - Fam HSA BluePreferred PP Vision - Fam	150.00 256.22 1.00		05/02/2016 SM1 4573.74 4573.74 0.00 10941
	Total Ea	arnings	0.00		7500.00	Total Ta	ixes			1528.63	Total Ded	uctions	1397.63		
Boshea Jr, David J Emp Id 32 Salary 7500.00	Code R	Earning Regular	Hours	Rate	Amount 350.00	Code FITW IL MED SS	Tax Federal Income T Illinois SITW Medicare OASDI	M-8 M-8	Taxable 350.00 350.00 350.00 350.00	5.07 21.70	Code	Deduction	Amount	Type Chk Date Batch Net Dir Dep Chk Amt	Reg 05/02/2016 SM1 323.23 323.23 0.00
	Total Ea	arnings	0.00		350.00	Total Ta	ixes			26.77	Total Ded	uctions	0.00	Chk/Vcr#	10942

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Employee

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Payroll Regi	ster						Compass N	Iarketin y (175583)	ng Inc	-		Check Date: Process: Period:	01/02/2013 to 2013010201 12/16/2012 to	to 20201019	01 328
Boshea Jr, David J Emp Id 32 Salary 7500.00	Code KM R	Earning 401k Match Regular	Hours	Rate	Amount 300.00 7500.00	Code FITW IL MED SS	Tax Federal Income T Illinois SITW Medicare OASDI	Status M-8 M-8	Taxable 6272.37 6272.37 6947.37 6947.37	Amount 789.13 208.03 100.74 430.74	401K 401KL 401KL2	Deduction 401K 401K Loan #2 AFLAC - pretax Auto Reimbursen Dental - Fam HSA BluePreferred PP Vision - Fam	113.41 -250.00 32.00 150.00 256.22 1.00	Type Chk Date Batch Net Dir Dep Chk Amt Chk/Vcr#	Reg 05/16/2016 SM2 4573.73 4573.73 0.00 11078
	Total Ea	arnings	0.00	7.7	7500.00	Total Ta	ixes			1528.64	Total Ded	luctions	1397.63		
Boshea Jr, David J Emp Id 32 Salary 7500.00	Code R	Earning Regular	Hours	Rate	Amount 350.00	FITW IL MED SS	Tax Federal Income T Illinois SITW Medicare OASDI	M-8 M-8	Taxable 350.00 350.00 350.00 350.00	5.07 21.70	Code	Deduction	Amount	Type Chk Date Batch Net Dir Dep Chk Amt	Reg 05/16/2016 SM2 323.23 323.23 0.00
	Total E	arnings	0.00		350.00	Total Ta	ixes			26.77	Total Ded	luctions	0.00	Chk/Vcr#	11079
Boshea Jr, David J Emp Id 32 Salary 7500.00	Code KM R	Earning 401k Match Regular	Hours	Rate	Amount 300.00 7500.00	Code FITW IL MED SS	Tax Federal Income T Illinois SITW Medicare OASDI	Status M-8 M-8	Taxable 6197.37 6197.37 6947.37 6947.37		Code 401K 401KL 401KL2 AFLPRE AUTO D4 HSA M-PPO4 V4 Total Ded	Deduction  401K  401K Loan  401K Loan #2  AFLAC - pretax  Auto Reimbursen  Dental - Fam  HSA  BluePreferred PP  Vision - Fam	Amount 750.00 270.00 150.00 113.41 -250.00 32.00 150.00 256.22 1.00 1472.63	Type Chk Date Batch Net Dir Dep Chk Amt Chk/Vcr #	Reg 06/01/2016 SM1 4520.30 4520.30 0.00 11217
20020				10					TALOUS.	1344		2500		E.	1.2
Boshea Jr, David J Emp Id 32 Salary 7500.00	Code R	Earning Regular	Hours	Rate	Amount 350.00	Code FITW IL MED SS	Tax Federal Income T Illinois SITW Medicare OASDI	M-8 M-8	Taxable 350.00 350.00 350.00 350.00	5.08 21.70	Code	Deduction	Amount	Type Chk Date Batch Net Dir Dep Chk Amt	Reg 06/01/2016 SM1 323.22 323.22 0.00
	Total Ea	arnings	0.00		350.00	Total Ta	ixes			26.78	Total Ded	luctions	0.00	Chk/Vcr#	11218

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Payroll Regi	ster						Compass N	Iarketin y (175583)	g Inc			Check Date: Process: Period:	01/02/2013 to 2013010201 12/16/2012 to	to 202010190	- 0
Boshea Jr, David J Emp Id 32 Salary 7500.00	Code KM R	Earning 401k Match Regular	Hours	Rate	Amount 300.00 7500.00	FITW	Tax Federal Income T Illinois SITW Medicare OASDI	Status M-8 M-8	Taxable 6197.37 6197.37 6947.37	Amount 770.38 205.21 100.73 430.73	401K 401KL 401KL2	Deduction 401K 401K Loan 401K Loan #2 AFLAC - pretax Auto Reimburser	750.00 270.00 150.00 113.41 -250.00	Chk Date Batch Net Dir Dep	Reg 06/16/2016 SM2 4520.32 4520.32 0.00
						-					D4 HSA M-PPO4 V4	Dental - Fam HSA BluePreferred PP Vision - Fam	32.00 150.00 256.22 1.00	Chk/Vcr#	11351
	Total E		0.00		7500.00	Total Ta				1507.05	Total Ded	uctions	1472.63		
Boshea Jr, David J Emp Id 32 Salary 7500.00	Code R	Earning Regular	Hours	Rate	350.00	FITW IL MED SS	Tax  Federal Income T Illinois SITW Medicare OASDI	M-8 M-8	Taxable 350.00 350.00 350.00 350.00	5.08 21.70	Code	Deduction	Amount	Type Chk Date Batch Net Dir Dep Chk Amt	Reg 06/16/2016 SM2 323.22 323.22 0.00
	Total E	arnings	0.00		350.00	Total Ta	ixes			26.78	Total Ded	uctions	0.00	Chk/Vcr#	11352
Boshea Jr, David J Emp Id 32 Salary 7500.00	Code KM R	Earning 401k Match Regular	Hours	Rate	Amount 300.00 7500.00	Code FITW IL MED SS	Tax Federal Income T Illinois SITW Medicare OASDI	Status M-8 M-8	Taxable 6197.37 6197.37 6947.37 6947.37			Deduction  401K  401K Loan  401K Loan #2  AFLAC - pretax  Auto Reimbursen  Dental - Fam  HSA  BluePreferred PP  Vision - Fam  uctions	Amount 750.00 270.00 150.00 113.41 -250.00 32.00 150.00 256.22 1.00		Reg 07/01/2016 SM1 4520.31 4520.31 0.00 11491
Boshea Jr, David J Emp Id 32 Salary 7500.00	Code R	Earning Regular	Hours	Rate	Amount 350.00	Code FITW IL MED SS	Tax Federal Income T Illinois SITW Medicare OASDI	Status M-8 M-8	Taxable 350.00 350.00 350.00 350.00	5.08 21.70		Deduction	Amount	Type Chk Date Batch Net Dir Dep Chk Amt	Reg 07/01/2016 SM1 323.22 323.22 0.00
	Total E	arnings	0.00		350.00	Total Ta	ixes			26.78	Total Ded	uctions	0.00	Chk/Vcr#	11492

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Payroll Regi	ster						Compass N	Iarketin y (175583)	g Inc			Check Date: Process: Period:	01/02/2013 to 2013010201 12/16/2012 to	to 202010190	01 330
Boshea Jr,	Code	Earning	Hours	Rate	Amount	Code	Tax	Status	Taxable	Amount	Code	Deduction	Amount	Type	Reg
David J	KM	401k Match		1000	300.00	FITW	Federal Income T	M-8	6197.37	770.38	401K	401K	750.00	Chk Date	07/18/2016
Emp Id 32	R	Regular			7500.00	IL	Illinois SITW	M-8	6197.37	205.21	401KL	401K Loan	270.00	Batch	SM2
Salary 7500.00		0.5				MED	Medicare		6947.37	100.74	401KL2	401K Loan #2	150.00	Net	4520.30
						SS	OASDI		6947.37	430.74	AFLPRE	AFLAC - pretax		Dir Dep	4520.30
											AUTO	Auto Reimbursen	-250.00	Chk Amt	0.00
											D4	Dental - Fam	32.00	Chk/Vcr#	11631
											HSA	HSA	150.00		
											M-PPO4	BluePreferred PP	256.22		
											V4	Vision - Fam	1.00		
	Total E	arnings	0.00	7.7	7500.00	Total Ta	ixes			1507.07	Total Ded	luctions	1472.63		
Boshea Jr,	Code	Earning	Hours	Rate	Amount	Code	Tax	Status	Taxable	Amount	Code	Deduction	Amount	Type	Reg
David J	R	Regular			350.00	FITW	Federal Income T		350.00					Chk Date	07/18/2016
Emp Id 32						IL	Illinois SITW	M-8	350.00					Batch	SM2
Salary 7500.00						MED	Medicare		350.00	5.07				Net	323.23
						SS	OASDI		350.00	21.70				Dir Dep	323.23
	Total E	arnings	0.00		350.00	Total Ta	2971			26.77	Total Ded	luctions	0.00	Chk/Vcr#	0.00 11632
Boshea Jr,		Earning	Hours	Rate			Tax	Status	Taxable			Deduction			Reg
David J	Code	401k Match	nours	Rate	300.00	Code FITW	Federal Income T		6197.37	770.38	401K	401K	750.00	Type Chk Date	08/01/2016
Emp Id 32	R	Regular			7500.00	IL	Illinois SITW	M-8	6197.37	205.21	401KL	401K Loan	270.00		SM1
Salary 7500.00	K	Regulai			7500.00	MED	Medicare	IVI-0	6947.37		401KL2	401K Loan #2	150.00		4520.31
Salary 7500.00						SS	OASDI		6947.37		AFLPRE	AFLAC - pretax		Dir Dep	4520.31
						55	OASDI		0547.57	450.75	AUTO	Auto Reimbursen	-250.00		0.00
											D4	Dental - Fam		Chk/Vcr#	11779
											HSA	HSA	150.00	CIIK VCI II	11/15
											M-PPO4	BluePreferred PP	256.22		
											V4	Vision - Fam	1.00		
	Total E	arnings	0.00		7500.00	Total Ta	ixes			1507.06	Total Ded		1472.63		
Boshea Jr,	Code	Earning	Hours	Rate	Amount	Code	Tax	Status	Taxable	Amount	Code	Deduction	Amount	Туре	Reg
David J	R	Regular			350.00	FITW	Federal Income T	M-8	350.00					Chk Date	08/01/2016
Emp Id 32						IL	Illinois SITW	M-8	350.00					Batch	SM1
Salary 7500.00						MED	Medicare		350.00	5.07				Net	323.23
						SS	OASDI		350.00	21.70				Dir Dep	323.23
						15.00								Chk Amt	0.00
	Total E	arnings	0.00		350.00	Total Ta	ixes			26.77	Total Dec	nctions	0.00	Chk/Vcr#	11780

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Payroll Regi	ster						Compass N	Iarketin y (175583)	g Inc			Check Date: Process: Period:	01/02/2013 to 2013010201 12/16/2012 to	to 20201019	01 331
Boshea Jr, David J Emp Id 32 Salary 7500.00	Code KM R	Earning 401k Match Regular	Hours	Rate	Amount 300.00 7500.00	FITW	Tax Federal Income T Illinois SITW Medicare OASDI	M-8 M-8	Taxable 6197.37 6197.37 6947.37 6947.37		401K	Deduction 401K 401K Loan 401K Loan #2 AFLAC - pretax Auto Reimbursen Dental - Fam HSA BluePreferred PP	Amount 750.00 270.00 150.00 113.41 -250.00 32.00 150.00 256.22	Chk Date Batch	Reg 08/16/2016 SM2 4520.30 4520.30 0.00 11920
	Total E	arnings	0.00		7500.00	Total Ta	200			1507.07	V4 Total Ded	Vision - Fam	1.00		
Boshea Jr,	Code	Earning	Hours	Rate	Amount	Code	Tax	Status	Taxable			Deduction	Amount	Type	Reg
David J Emp Id 32 Salary 7500.00	R	Regular			350.00	FITW IL MED SS	Federal Income T Illinois SITW Medicare OASDI	M-8 M-8	350.00 350.00 350.00 350.00	5.07 21.70	0.7			Chk Date Batch Net Dir Dep Chk Amt	08/16/2016 SM2 323.23 323.23 0.00
	Total E	arnings	0.00		350.00	Total Ta	ixes	1	X	26.77	Total Ded	luctions	0.00	Chk/Vcr#	11921
Boshea Jr, David J Emp Id 32 Salary 7500.00	Code KM R	Earning 401k Match Regular	Hours	Rate	Amount 300.00 7500.00	Code FITW IL MED SS	Tax Federal Income T Illinois SITW Medicare OASDI	Status M-8 M-8	Taxable 6197.37 6197.37 6947.37 1592.08		Code 401K 401KL 401KL2 AFLPRE AUTO D4 HSA M-PPO4 V4 Total Dec	Deduction  401K  401K Loan  401K Loan #2  AFLAC - pretax  Auto Reimbursen  Dental - Fam  HSA  BluePreferred PP  Vision - Fam  uctions	-250.00	Type Chk Date Batch Net Dir Dep Chk Amt Chk/Vcr #	Reg 09/01/2016 SM1 4852.33 4852.33 0.00 12057
Boshea Jr,	Code	Earning	Hours	Rate	Amount		Tax	Status	Taxable	Amount	Code	Deduction	Amount	Type	Reg
David J Emp Id 32 Salary 7500.00	R	Regular	nous	Nate	350.00	FITW IL MED SS	Federal Income T Illinois SITW Medicare OASDI		350.00 350.00 350.00	5.08	Code	Deduction	Amount	Chk Date Batch Net Dir Dep Chk Amt	09/01/2016 SM1 344.92 344.92 0.00
	Total E	arnings	0.00		350.00	Total Ta	ixes			5.08	Total Dec	luctions	0.00	Chk/Vcr#	12058

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Employee

Payroll Regi	ster						Compass N	Iarketin y (175583)	g Inc			Check Date: Process: Period:	01/02/2013 to 2013010201 12/16/2012 to	to 20201019	01 332
Boshea Jr, David J Emp Id 32 Salary 7500.00	Code KM R	Earning 401k Match Regular	Hours	Rate	Amount 300.00 7500.00	FITW	Tax Federal Income T Illinois SITW Medicare OASDI	M-8 M-8 M-8	Taxable 6197.37 6197.37 6947.37	Amount 770.38 205.21 100.73	Code 401K 401KL 401KL2 AFLPRE AUTO D4 HSA M-PPO4 V4	Deduction 401K 401K Loan #2 AFLAC - pretax Auto Reimbursen Dental - Fam HSA BluePreferred PP Vision - Fam	150.00 113.41 -250.00 32.00 150.00 256.22 1.00	Type Chk Date Batch Net Dir Dep Chk Amt Chk/Vcr#	Reg 09/16/2016 SM2 4951.05 4951.05 0.00 12191
	Total E	arnings	0.00		7500.00	Total Ta	ixes			1076.32	Total Ded	uctions	1472.63		
Boshea Jr, David J Emp Id 32 Salary 7500.00	Code R	Earning Regular	Hours	Rate	Amount 350.00	Code FITW IL MED SS	Tax Federal Income T Illinois SITW Medicare OASDI	Status M-8 M-8	Taxable 350.00 350.00 350.00	Amount 5.08	Code	Deduction	Amount	Type Chk Date Batch Net Dir Dep Chk Amt	Reg 09/16/2016 SM2 344.92 344.92 0.00
	Total Ea	arnings	0.00		350.00	Total Ta	ixes			5.08	Total Ded	uctions	0.00	Chk/Vcr#	12192
Boshea Jr, David J Emp Id 32 Salary 7500.00	Code KM R	Earning 401k Match Regular	Hours	Rate	Amount 300.00 7500.00	Code FITW IL MED SS	Tax  Federal Income T Illinois SITW Medicare OASDI	M-8 M-8	Taxable 6197.37 6197.37 6947.37	Amount 770.38 205.21 100.74	Code 401K 401KL 401KL2 AFLPRE AUTO D4 HSA M-PPO4 V4	Deduction  401K  401K Loan #2  AFLAC - pretax  Auto Reimbursen  Dental - Fam  HSA  BluePreferred PP  Vision - Fam	150.00 113.41 -250.00	Type Chk Date Batch Net Dir Dep Chk Amt Chk/Vcr #	Reg 10/03/2016 SM1 4951.04 4951.04 0.00 12337
الأرام ف				70					The Charles	27027	F-75.	25.50		2	1-0
Boshea Jr, David J Emp Id 32 Salary 7500.00	Code R	Earning Regular	Hours	Rate	350.00	FITW IL MED SS	Tax Federal Income T Illinois SITW Medicare OASDI	M-8 M-8	350.00 350.00 350.00	Amount 5.07	Code	Deduction	Amount	Type Chk Date Batch Net Dir Dep Chk Amt	Reg 10/03/2016 SM1 344.93 344.93 0.00
	Total E	arnings	0.00		350.00	Total Ta	ixes			5.07	Total Ded	uctions	0.00	Chk/Vcr#	12338

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Employee

Payroll Regi	ster						Compass N	Iarketin y (175583)	g Inc			Check Date: Process: Period:	01/02/2013 to 2013010201 12/16/2012 to	to 202010190	Pag 01 33
Boshea Jr, David J Emp Id 32 Salary 7500.00	Code KM R	Earning 401k Match Regular	Hours	Rate	Amount 300.00 7500.00	Code FITW IL MED SS	Tax Federal Income T Illinois SITW Medicare OASDI	Status M-8 M-8	Taxable 6197.37 6197.37 6947.37	Amount 770.38 205.21 100.74	Code 401K 401KL 401KL2 AFLPRE AUTO D4 HSA M-PPO4 V4	Deduction 401K 401K Loan 401K Loan #2 AFLAC - pretax Auto Reimbursen Dental - Fam HSA BluePreferred PP Vision - Fam	Amount 750.00 270.00 150.00 113.41 -250.00 32.00 150.00 256.22 1.00	Chk Date Batch	Reg 10/17/2016 SM2 4951.04 4951.04 0.00 12469
	Total E	arnings	0.00		7500.00	Total Ta	ixes			1076.33	Total Ded		1472.63		
Boshea Jr, David J Emp Id 32 Salary 7500.00	Code R	Earning Regular	Hours	Rate	Amount 350.00	Code FITW IL MED SS	Tax  Federal Income T Illinois SITW Medicare OASDI	M-8 M-8	Taxable 350.00 350.00 350.00	Amount 5.07	Code	Deduction	Amount	Type Chk Date Batch Net Dir Dep	Reg 10/17/2016 SM2 344.93 344.93
	Total Ea	arnings	0.00		350.00	Total Ta	ixes			5.07	Total Ded	luctions	0.00	Chk Amt Chk/Vcr#	0.00 12470
Boshea Jr, David J Emp Id 32 Salary 7500.00	Code KM R	Earning 401k Match Regular	Hours	Rate	Amount 300.00 7500.00	Code FITW IL MED SS	Tax  Federal Income T Illinois SITW Medicare OASDI	Status M-8 M-8	Taxable 6197.37 6197.37 6947.37	770.38 205.21	Code 401K 401KL 401KL2 AFLPRE AUTO D4 HSA M-PPO4 V4	Deduction  401K  401K Loan  401K Loan #2  AFLAC - pretax  Auto Reimburser  Dental - Fam  HSA  BluePreferred PP  Vision - Fam	750.00 270.00 150.00 113.41 -250.00	Chk Date Batch	Reg 11/01/2016 SM1 4951.04 4951.04 0.00 12602
Dochoo Iv		Earning	Hours	Rate	Amount		Tax	Status	Taxable	Amount	Code	Deduction		Trans	Pog
Boshea Jr, David J Emp Id 32 Salary 7500.00	Code R	Regular	nours	Kate	350.00	FITW IL MED SS	Federal Income T Illinois SITW Medicare OASDI	M-8 M-8	350.00 350.00 350.00	Amount 5.07	Code	Deduction	Amount	Type Chk Date Batch Net Dir Dep Chk Amt	Reg 11/01/2016 SM1 344.93 344.93 0.00
	Total E	arnings	0.00		350.00	Total Ta	ixes			5.07	Total Ded	luctions	0.00	Chk/Vcr#	12603

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Payroll Regi	ster						Compass N	Iarketin y (175583)	g Inc			Check Date: Process: Period:	01/02/2013 to 2013010201 12/16/2012 to	to 202010190	Pag 01 33
Boshea Jr, David J Emp Id 32 Salary 7500.00	Code KM R	Earning 401k Match Regular	Hours	Rate	Amount 300.00 7500.00	Code FITW IL MED SS	Tax Federal Income T Illinois SITW Medicare OASDI	Status M-8 M-8	Taxable 6197.37 6197.37 6947.37	Amount 770.38 205.21 100.74	Code 401K 401KL 401KL2 AFLPRE AUTO D4 HSA M-PPO4 V4	Deduction 401K 401K Loan 401K Loan #2 AFLAC - pretax Auto Reimbursen Dental - Fam HSA BluePreferred PP Vision - Fam	Amount 750.00 270.00 150.00 113.41 -250.00 32.00 150.00 256.22 1.00	Chk Date Batch	Reg 11/16/2016 SM2 4951.04 4951.04 0.00 12728
	Total E	arnings	0.00		7500.00	Total Ta	ixes			1076.33	Total Ded		1472.63		
Boshea Jr, David J Emp Id 32 Salary 7500.00	Code R	Earning Regular	Hours	Rate	Amount 350.00	Code FITW IL MED SS	Tax Federal Income T Illinois SITW Medicare OASDI	M-8 M-8	Taxable 350.00 350.00 350.00	Amount 5.08	Code	Deduction	Amount	Type Chk Date Batch Net Dir Dep	Reg 11/16/2016 SM2 344.92 344.92
	Total E	arnings	0.00		350.00	Total Ta	ixes			5.08	Total Ded	luctions	0.00	Chk Amt Chk/Vcr#	0.00 12729
Boshea Jr, David J Emp Id 32 Salary 7500.00	Code KM R	Earning 401k Match Regular	Hours	Rate	Amount 300.00 7500.00	Code FITW IL MED SS	Tax Federal Income T Illinois SITW Medicare OASDI	M-8 M-8	Taxable 6197.37 6197.37 6947.37	770.38 205.21	Code 401K 401KL 401KL2 AFLPRE AUTO D4 HSA M-PPO4 V4	Deduction 401K 401K Loan 401K Loan #2 AFLAC - pretax Auto Reimbursen Dental - Fam HSA BluePreferred PP Vision - Fam	750.00 270.00 150.00 113.41 -250.00	Chk Date Batch	Reg 12/01/2016 SM1 4951.05 4951.05 0.00 12864
n 1 -			11,555	ъ.				~ .	m 11		A STATE OF	27.5-6		m	
Boshea Jr, David J Emp Id 32 Salary 7500.00	Code R	Earning Regular	Hours	Rate	350.00	FITW IL MED SS	Tax Federal Income T Illinois SITW Medicare OASDI	M-8 M-8	Taxable 350.00 350.00 350.00	Amount 5.08	Code	Deduction	Amount	Type Chk Date Batch Net Dir Dep Chk Amt	Reg 12/01/2016 SM1 344.92 344.92 0.00
	Total E	arnings	0.00		350.00	Total Ta	nxes			5.08	Total Ded	luctions	0.00	Chk/Vcr#	12865

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Payroll Regi	ster						Compass N	Iarketir ay (175583)	g Inc			Check Date: Process: Period:	01/02/2013 to 2013010201 12/16/2012 to	to 202010190	01 335
Boshea Jr, David J Emp Id 32 Salary 7500.00	Code KM R	Earning 401k Match Regular	Hours	Rate	Amount 300.00 7500.00	FITW IL MED SS	Tax Federal Income T Illinois SITW Medicare OASDI	M-8 M-8	Taxable 6197.37 6197.37 6947.37	Amount 770.38 205.21 100.73	Code 401K 401KL2 AFLPRE AUTO D4 HSA M-PPO4 V4	Deduction  401K  401K Loan #2  AFLAC - pretax  Auto Reimbursen  Dental - Fam  HSA  BluePreferred PP  Vision - Fam		Chk Date Batch Net Dir Dep	Reg 12/16/2016 SM2 5221.05 5221.05 0.00 12988
	Total Ea	arnings	0.00		7500.00	Total Ta		VA 1	20.00	1076.32	Total Ded		1202.63		
Boshea Jr, David J Emp Id 32 Salary 7500.00	Code R	Earning Regular	Hours	Rate	Amount 350.00	Code FITW IL MED SS	Tax Federal Income T Illinois SITW Medicare OASDI	M-8 M-8	Taxable 350.00 350.00 350.00	Amount 5.08	Code	Deduction	Amount	Type Chk Date Batch Net Dir Dep Chk Amt	Reg 12/16/2016 SM2 344.92 344.92 0.00
	Total Ea	arnings	0.00		350.00	Total Ta	ixes			5.08	Total Ded	luctions	0.00	Chk/Vcr#	12989
Boshea Jr, David J Emp Id 32 Salary 7500.00	Code KM R	Earning 401k Match Regular	Hours	Rate	Amount 300.00 7500.00	MED SS	Tax Federal Income T Illinois SITW Medicare OASDI	Status M-8 M-8	Taxable 6197.37 6197.37 6947.37 6947.37	430.74	AUTO D4 HSA M-PPO4 V4	Deduction 401K 401K Loan #2 AFLAC - pretax Auto Reimbursen Dental - Fam HSA BluePreferred PP Vision - Fam	32.00 150.00 256.22 1.00	Chk Date Batch Net Dir Dep	Reg 01/03/2017 SM1 4794.05 4794.05 0.00 13116
	Total Ea	arnings	0.00		7500.00	Total Ta	Part			1503.32	Total Ded	LANCE MANAGEMENT	1202.63		
Boshea Jr, David J Emp Id 32 Salary 7500.00	Code KM R	Earning 401k Match Regular	Hours	Rate	Amount 14.00 350.00	Code FITW IL MED SS	Tax Federal Income T Illinois SITW Medicare OASDI	M-8 M-8	Taxable 19.59 19.59 54.59 54.59		Code 401K 401KL2 AFLPRE AUTO D4 HSA Total Ded	Deduction 401K 401K Loan #2 AFLAC - pretax Auto Reimbursen Dental - Fam HSA	Amount 35.00 150.00 113.41 -250.00 32.00 150.00 230.41	Chk Date Batch	Reg 01/03/2017 SM1 115.42 115.42 0.00 13117

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Employee

Payroll Regi	ster						Compass N	Iarketir y (175583)	g Inc			Check Date: Process: Period:	01/02/2013 to 2013010201 12/16/2012 to	to 20201019	01 336
Boshea Jr, David J Emp Id 32 Salary 7500.00	Code HSA KM R	Earning HSA - Employer 401k Match Regular	Hours	Rate	300.00 7500.00	FITW IL MED SS	Tax Federal Income T Illinois SITW Medicare OASDI	Status M-8 M-8	Taxable 6197.37 6197.37 6947.37 6947.37	100.74 430.74	401K 401KL 401KL2 AFLPRE AUTO D4 HSA M-PPO4 V4	Deduction 401K 401K Loan 401K Loan #2 AFLAC - pretax Auto Reimbursen Dental - Fam HSA BluePreferred PP Vision - Fam	Amount 750.00 270.00 150.00 113.41 -250.00 32.00 150.00 256.22 1.00	Chk Date Batch Net Dir Dep	Reg 01/17/2017 SM2 4524.05 4524.05 0.00 13240
	Total E		0.00	200	7500.00	Total Ta		20.00	12 6	1503.32	Total Ded		1472.63	2	
Boshea Jr, David J Emp Id 32 Salary 7500.00	Code R	Earning Regular	Hours	Rate	Amount 350.00	FITW IL MED SS	Tax Federal Income T Illinois SITW Medicare OASDI	M-8 M-8	Taxable 680.41 680.41 645.41 645.41	9.35 40.01	Code 401K 401KL 401KL2 AFLPRE AUTO HSA V4	Deduction  401K  401K Loan  401K Loan #2  AFLAC - pretax  Auto Reimbursen  HSA  Vision - Fam	Amount -35.00 -35.00 -150.00 -113.41 250.00 -150.00 -32.00	Chk Date Batch Net Dir Dep Chk Amt	Reg 01/17/2017 SM2 566.05 566.05 0.00 13241
	Total E	arnings	0.00		350.00	Total Ta	ixes			49.36	Total Ded	uctions	-265.41		
Boshea Jr, David J Emp Id 32 Salary 7500.00	Code KM R	Earning 401k Match Regular	Hours	Rate	Amount 300.00 7500.00	FITW IL MED SS	Tax  Federal Income T Illinois SITW Medicare OASDI	M-8 M-8	Taxable 6197.37 6197.37 6947.37 6947.37	430.74	401K 401KL 401KL2 AFLPRE AUTO D4 HSA M-PPO4 V4	Deduction  401K  401K Loan  401K Loan #2  AFLAC - pretax  Auto Reimbursen  Dental - Fam  HSA  BluePreferred PP  Vision - Fam	150.00 256.22 1.00	Chk Date Batch Net Dir Dep	Reg 02/01/2017 SM1 4524.05 4524.05 0.00 13381
	Total E		0.00		7500.00	Total Ta	ixes			1503.32	Total Dec	uctions	1472.63		
Boshea Jr, David J Emp Id 32 Salary 7500.00	Code R	Earning Regular	Hours	Rate	Amount 350.00	FITW IL MED SS	Tax Federal Income T Illinois SITW Medicare OASDI	M-8 M-8	Taxable 350.00 350.00 350.00 350.00	5.08 21.70	Code	Deduction	Amount	Type Chk Date Batch Net Dir Dep Chk Amt	Reg 02/01/2017 SM1 323.22 323.22 0.00
	Total E	arnings	0.00		350.00	Total Ta	ixes			26.78	Total Ded	uctions	0.00	Chk/Vcr#	13382

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Employee

Payroll Regi	ster						Compass N	Iarketin ny (175583)	ng Inc			Check Date: Process: Period:	01/02/2013 to 2013010201 12/16/2012 to	to 202010190	01 33
Boshea Jr,	Code	Earning	Hours	Rate	Amount		Tax	Status	Taxable	Amount		Deduction	Amount		Reg
David J Emp Id 32 Salary 7500.00	KM R	401k Match Regular			300.00 7500.00	IL MED SS	Federal Income T Illinois SITW Medicare OASDI	M-8 M-8	6197.37 6197.37 6947.37 6947.37	766.63 205.21 100.73 430.74	401K 401KL 401KL2 AFLPRE AUTO D4 HSA M-PPO4	401K Loan 401K Loan #2 AFLAC - pretax Auto Reimbursen Dental - Fam HSA BluePreferred PP	750.00 270.00 150.00 113.41 -250.00 32.00 150.00 256.22	Dir Dep	02/16/2017 SM2 4524.06 4524.06 0.00 13496
	Total Ea	rnings	0.00		7500.00	Total Ta	200			1503.31	V4 Total Ded	Vision - Fam	1.00		
Boshea Jr,	Code	Earning	Hours	Rate	Amount	Code	Tax	Status	Taxable	Amount	Code	Deduction	Amount	Туре	Reg
David J Emp Id 32 Salary 7500.00	R	Regular			350.00	FITW IL MED SS	Federal Income T Illinois SITW Medicare OASDI	27.227.19.1	350.00 350.00 350.00 350.00	5.08 21.70				Chk Date Batch Net Dir Dep Chk Amt	02/16/2017 SM2 323.22 323.22 0.00
	Total Ea	arnings	0.00		350.00	Total Ta	ixes	7	7	26.78	Total Ded	luctions	0.00	Chk/Vcr#	13497
Boshea Jr, David J Emp Id 32 Salary 7500.00	Code KM R	Earning 401k Match Regular	Hours	Rate	Amount 300.00 7500.00	Code FITW IL MED SS	Tax Federal Income T Illinois SITW Medicare OASDI	M-8 M-8	Taxable 6197.37 6197.37 6947.37 6947.37	Amount 766.63 205.21 100.73 430.73	Code 401K 401KL 401KL2 AFLPRE AUTO D4 HSA M-PPO4 V4 Total Dec	Deduction  401K  401K Loan  401K Loan #2  AFLAC - pretax  Auto Reimbursen  Dental - Fam  HSA  BluePreferred PP  Vision - Fam  Juctions	150.00 113.41 -250.00	Chk Date Batch Net Dir Dep	Reg 03/01/2017 SM1 4524.07 4524.07 0.00 13616
Boshea Jr,	Code	Earning	Hours	Rate	Amount	Code	Tax	Status	Taxable	Amount	Code	Deduction	Amount	Type	Reg
David J Emp Id 32 Salary 7500.00	R	Regular			350.00	FITW IL MED SS	Federal Income T Illinois SITW Medicare OASDI	M-8 M-8	350.00 350.00 350.00 350.00	5.08 21.70				Chk Date Batch Net Dir Dep Chk Amt	03/01/2017 SM1 323.22 323.22 0.00
	Total Ea	arnings	0.00		350.00	Total Ta	ixes			26.78	Total Ded	luctions	0.00	Chk/Vcr#	13617

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Employee

Payroll Regi	ster						Compass N	Iarketin y (175583)	g Inc			Check Date: Process: Period:	01/02/2013 to 2013010201 12/16/2012 to	to 202010190	
Boshea Jr, David J Emp Id 32 Salary 7500.00	Code KM R	Earning 401k Match Regular	Hours	Rate	Amount 300.00 7500.00	FITW IL MED SS	Tax  Federal Income T Illinois SITW Medicare OASDI	M-8 M-8	Taxable 6197.37 6197.37 6947.37 6947.37	430.74	401K 401KL 401KL2 AFLPRE AUTO D4 HSA M-PPO4 V4	Deduction  401K  401K Loan  401K Loan #2  AFLAC - pretax  Auto Reimbursen  Dental - Fam  HSA  BluePreferred PP  Vision - Fam	-250.00 32.00 150.00 256.22 1.00	Chk Date Batch Net Dir Dep	Reg 03/16/2017 SM2 4524.05 4524.05 0.00 13731
	Total E	arnings	0.00		7500.00	Total Ta	ixes			1503.32	Total Ded	luctions	1472.63		
Boshea Jr, David J Emp Id 32 Salary 7500.00	Code R	Earning Regular	Hours	Rate	350.00	Code FITW IL MED SS	Tax Federal Income T Illinois SITW Medicare OASDI	M-8 M-8	Taxable 350.00 350.00 350.00 350.00	5.07 21.70	Code	Deduction	Amount	Type Chk Date Batch Net Dir Dep Chk Amt	Reg 03/16/2017 SM2 323.23 323.23 0.00
	Total E	arnings	0.00		350.00	Total Ta	ixes		7	26.77	Total Ded	luctions	0.00	Chk/Vcr#	13732
Boshea Jr, David J Emp Id 32 Salary 7500.00	Code KM R	Earning 401k Match Regular	Hours	Rate	Amount 300.00 7500.00	Code FITW IL MED SS	Tax  Federal Income T Illinois SITW Medicare OASDI	M-8 M-8	Taxable 6197.37 6197.37 6947.37 6947.37		Code 401K 401KL 401KL2 AFLPRE AUTO D4 HSA M-PPO4 V4	Deduction  401K  401K Loan  401K Loan #2  AFLAC - pretax  Auto Reimbursen  Dental - Fam  HSA  BluePreferred PP  Vision - Fam	Amount 750.00 270.00 150.00 113.41 -250.00 32.00 150.00 256.22 1.00	Chk Date Batch Net	Reg 04/03/2017 SM1 4524.05 4524.05 0.00 13851
											ATTENDED TO	23.00			
Boshea Jr; David J Emp Id 32 Salary 7500.00	Code R	Earning Regular	Hours	Rate	Amount 350.00	Code FITW IL MED SS	Tax Federal Income T Illinois SITW Medicare OASDI	M-8 M-8	Taxable 350.00 350.00 350.00 350.00	5.07 21.70	Code	Deduction	Amount	Type Chk Date Batch Net Dir Dep Chk Amt	Reg 04/03/2017 SM1 323.23 323.23 0.00
	Total E	arnings	0.00		350.00	Total Ta	ixes			26.77	Total Ded	luctions	0.00	Chk/Vcr#	13852

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Employee

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Payroll Regi	ster						Compass N	Iarketin y (175583)	ng Inc			Check Date: Process: Period:	01/02/2013 to 2013010201 12/16/2012 to	to 202010190	01 339
Boshea Jr, David J Emp Id 32 Salary 7500.00	Code KM R	Earning 401k Match Regular	Hours	Rate	Amount 300.00 7500.00	FITW	Tax Federal Income T Illinois SITW Medicare OASDI	Status M-8 M-8	Taxable 6197.37 6197.37 6947.37 6947.37	Amount 766.63 205.21 100.74 430.74	Code 401K 401KL 401KL2 AFLPRE AUTO D4 HSA M-PPO4 V4	Deduction 401K 401K Loan #2 AFLAC - pretax Auto Reimbursen Dental - Fam HSA BluePreferred PP Vision - Fam	100 Page 1	Chk Date Batch Net Dir Dep	Reg 04/18/2017 SM2 4524.05 4524.05 0.00 13976
	Total Ea	arnings	0.00	7.7	7500.00	Total Ta	ixes			1503.32	Total Dec	luctions	1472.63		
Boshea Jr,	Code	Earning	Hours	Rate	Amount	Code	Tax	Status	Taxable	Amount	Code	Deduction	Amount	Type	Reg
David J Emp Id 32 Salary 7500.00	R	Regular			350.00	FITW IL MED SS	Federal Income T Illinois SITW Medicare OASDI	M-8 M-8	350.00 350.00 350.00 350.00	5.07 21.70				Chk Date Batch Net Dir Dep Chk Amt	04/18/2017 SM2 323.23 323.23 0.00
	Total Ea	arnings	0.00		350.00	Total Ta	ixes			26.77	Total Dec	luctions	0.00	Chk/Vcr#	13977
Boshea Jr,	Code	Earning	Hours	Rate	Amount	Code	Tax	Status	Taxable	Amount	Code	Deduction	Amount	Type	Reg
David J Emp Id 32 Salary 7500.00	KM R	401k Match Regular			300.00 7500.00	FITW IL MED SS	Federal Income T Illinois SITW Medicare OASDI	M-8 M-8	6197.37 6197.37 6947.37 6947.37	430.73	401K 401KL 401KL2 AFLPRE AUTO D4 HSA M-PPO4 V4	401K 401K Loan 401K Loan #2 AFLAC - pretax Auto Reimbursen Dental - Fam HSA BluePreferred PP Vision - Fam	150.00 256.22 1.00		05/01/2017 SM1 4524.06 4524.06 0.00 14101
	Total Ea	arnings	0.00		7500.00	Total Ta	ixes			1503.31	Total Ded	luctions	1472.63		
Boshea Jr, David J Emp Id 32 Salary 7500.00	Code R	Earning Regular	Hours	Rate	Amount 350.00	Code FITW IL MED SS	Tax Federal Income T Illinois SITW Medicare OASDI	M-8 M-8	Taxable 350.00 350.00 350.00 350.00	5.08 21.70	Code	Deduction	Amount	Type Chk Date Batch Net Dir Dep Chk Amt	Reg 05/01/2017 SM1 323.22 323.22 0.00
	Total Ea	arnings	0.00		350.00	Total Ta	ıxes			26.78	Total Ded	luctions	0.00	Chk/Vcr#	14102

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10/22/20 01:42 PM

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Employee

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Payroll Regi	ster						Compass N	larketin y (175583)	g Inc			Check Date: Process: Period:	01/02/2013 to 2013010201 12/16/2012 to	to 202010190	Page 340
Boshea Jr, David J Emp Id 32 Salary 7500.00	Code KM R	Earning 401k Match Regular	Hours	Rate	Amount 300.00 7500.00	FITW	Tax Federal Income T Illinois SITW Medicare OASDI	Status M-8 M-8	Taxable 6197.37 6197.37 6947.37 6947.37	Amount 766.63 205.21 100.73 430.74	Code 401K 401KL 401KL2 AFLPRE AUTO D4 HSA M-PPO4 V4	Deduction 401K 401K Loan 401K Loan #2 AFLAC - pretax Auto Reimbursen Dental - Fam HSA BluePreferred PP Vision - Fam	Amount 750.00 270.00 150.00 113.41 -250.00 32.00 150.00 256.22 1.00	Chk Date Batch Net Dir Dep	Reg 05/16/2017 SM2 4524.06 4524.06 0.00 14220
	Total Ea	arnings	0.00	7.7	7500.00	Total Ta	ixes			1503.31	Total Ded	uctions	1472.63		
Boshea Jr,	Code	Earning	Hours	Rate	Amount	Code	Tax	Status	Taxable	Amount	Code	Deduction	Amount	Type	Reg
David J Emp Id 32 Salary 7500.00	R	Regular			350.00	FITW IL MED SS	Federal Income T Illinois SITW Medicare OASDI	M-8 M-8	350.00 350.00 350.00 350.00	5.08 21.70				Chk Date Batch Net Dir Dep Chk Amt	05/16/2017 SM2 323.22 323.22 0.00
	Total Ea	arnings	0.00		350.00	Total Ta	ixes			26.78	Total Ded	uctions	0.00	Chk/Vcr#	14221
Boshea Jr,	Code	Earning	Hours	Rate	Amount	Code	Tax	Status	Taxable	Amount	Code	Deduction	Amount	Type	Reg
David J Emp Id 32 Salary 7500.00	KM R	401k Match Regular			300.00 7500.00	FITW IL MED SS	Federal Income T Illinois SITW Medicare OASDI	M-8 M-8	6197.37 6197.37 6947.37 6947.37	430.74	401K 401KL 401KL2 AFLPRE AUTO D4 HSA M-PPO4 V4	401K 401K Loan 401K Loan #2 AFLAC - pretax Auto Reimbursen Dental - Fam HSA BluePreferred PP Vision - Fam	150.00 256.22 1.00		06/01/2017 SM1 4524.05 4524.05 0.00 14340
	Total Ea	arnings	0.00		7500.00	Total Ta	ixes			1503.32	Total Ded	uctions	1472.63		
Boshea Jr, David J Emp Id 32 Salary 7500.00	Code R	Earning Regular	Hours	Rate	Amount 350.00	Code FITW IL MED SS	Tax Federal Income T Illinois SITW Medicare OASDI	M-8 M-8	Taxable 350.00 350.00 350.00 350.00	5.07 21.70	Code	Deduction	Amount	Type Chk Date Batch Net Dir Dep Chk Amt	Reg 06/01/2017 SM1 323.23 323.23 0.00
	Total Ea	arnings	0.00		350.00	Total Ta	ixes			26.77	Total Ded	uctions	0.00	Chk/Vcr#	14341

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Employee

Payroll Regi	ster						Compass N.	larketin y (175583)	g Inc			Check Date: Process: Period:	01/02/2013 to 2013010201 12/16/2012 to	to 20201019	Pag 01 34
Boshea Jr, David J Emp Id 32 Salary 7500.00	Code R	Earning Regular	Hours	Rate	Amount 7500.00	FITW IL MED SS	Tax Federal Income T Illinois SITW Medicare OASDI	M-8 M-8	Taxable 6947.37 6947.37 6947.37 6947.37		401KL 401KL2 AFLPRE	Deduction  401K Loan  401K Loan #2  AFLAC - pretax  Auto Reimbursen  Dental - Fam  HSA  BluePreferred PP  Vision - Fam	Amount 270.00 150.00 113.41 -250.00 32.00 150.00 256.22 1.00	Chk Date Batch Net Dir Dep Chk Amt	Reg 06/16/2017 SM2 5058.43 5058.43 0.00 14455
	Total Ea	arnings	0.00		7500.00	Total Ta	ixes			1718.94	Total Dec	luctions	722.63		
Boshea Jr,	Code	Earning	Hours	Rate	Amount	Code	Tax	Status	Taxable	Amount	Code	Deduction	Amount	Type	Reg
David J Emp Id 32 Salary 7500.00	R	Regular			350.00	FITW IL MED SS	Federal Income T Illinois SITW Medicare OASDI	M-8 M-8	350.00 350.00 350.00 350.00	5.07 21.70				Chk Date Batch Net Dir Dep Chk Amt	06/16/2017 SM2 323.23 323.23 0.00
	Total E	arnings	0.00		350.00	Total T	ixes			26.77	Total Ded	luctions	0.00	Chk/Vcr#	14456
Boshea Jr,	Code	Earning	Hours	Rate	Amount	Code	Tax	Status	Taxable	Amount	Code	Deduction	Amount	Type	Reg
David J Emp Id 32 Salary 7500.00	R	Regular			7500.00	FITW IL MED SS	Federal Income T Illinois SITW Medicare OASDI	M-8 M-8	6947.37 6947.37 6947.37 6947.37		401KL 401KL2 AFLPRE AUTO D4 HSA M-PPO4 V4	401K Loan 401K Loan #2 AFLAC - pretax Auto Reimbursen Dental - Fam HSA BluePreferred PP Vision - Fam	270.00 150.00 113.41 -250.00 32.00 150.00 256.22 1.00	Net Dir Dep Chk Amt	06/30/2017 SM1 5058.42 5058.42 0.00 14572
	Total Ea	arnings	0.00		7500.00	Total Ta	ixes			1718.95	Total Dec	luctions	722.63		
Boshea Jr, David J Emp Id 32 Salary 7500.00	Code R	Earning Regular	Hours	Rate	Amount 350.00	FITW IL MED SS	Tax Federal Income T Illinois SITW Medicare OASDI	M-8 M-8	Taxable 350.00 350.00 350.00 350.00	5.07 21.70	Code	Deduction	Amount	Type Chk Date Batch Net Dir Dep Chk Amt	Reg 06/30/2017 SM1 323.23 323.23 0.00
	Total Ea	arnings	0.00		350.00	Total Ta	ixes			26.77	Total Dec	luctions	0.00	Chk/Vcr#	14573
Boshea Jr, David J Emp Id 32 Salary 7500.00	Code R	Earning Regular	Hours	Rate	Amount 7500.00	Code FITW IL MED SS	Tax Federal Income T Illinois SITW Medicare OASDI	Status M-8 M-8	Taxable 6947.37 6947.37 6947.37 6947.37		401KL	Deduction 401K Loan 401K Loan #2 AFLAC - pretax Auto Reimbursen Dental - Fam HSA BluePreferred PP Vision - Fam	Amount 270.00 150.00 113.41 -250.00 32.00 150.00 256.22 1.00	Chk Date Batch Net Dir Dep Chk Amt	Reg 07/17/2017 SM2 5058.42 5058.42 0.00 14694
	Total Ea	arnings	0.00		7500.00	Total Ta	ixes			1718.95		- C - C - C - C - C - C - C - C - C - C	722.63		

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Employee

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Payroll Regi	ster						Compass N. Compan	Iarketin y (175583)	g Inc			Check Date: Process: Period:	01/02/2013 to 2013010201 12/16/2012 to	to 20201019	01 3
Boshea Jr, David J Emp Id 32 Salary 7500.00	Code R	Earning Regular	Hours	Rate	Amount 350.00	Code FITW IL MED SS	Tax Federal Income T Illinois SITW Medicare OASDI	M-8 M-8	Taxable 350.00 350.00 350.00 350.00	5.08 21.70	Code	Deduction	Amount	Type Chk Date Batch Net Dir Dep	Reg 07/17/2017 SM2 323.22 323.22
	Total Ea	rnings	0.00		350.00	Total Ta	Yes			26.78	Total Ded	Inctions	0.00	Chk Amt Chk/Vcr#	0.00 14695
Boshea Jr.	Code	Earning	Hours	Rate	Amount	Code	Tax	Status	Taxable	Amount	Code	Deduction	Amount		Reg
David J Emp Id 32 Salary 7500.00	R	Regular			7500.00	FITW IL MED SS	Federal Income T Illinois SITW Medicare OASDI	M-8 M-8	6947.37 6947.37 6947.37 6947.37	954.13 308.01 100.73 430.73	401KL 401KL2	401K Loan 401K Loan #2 AFLAC - pretax Auto Reimbursen Dental - Fam HSA BluePreferred PP Vision - Fam	270.00 150.00 113.41 -250.00 32.00 150.00 256.22 1.00	Chk Date Batch Net Dir Dep	08/01/2017 SM1 4983.77 4983.77 0.00 14825
	Total Ea	rnings	0.00		7500.00	Total Ta	ixes			1793.60	Total Ded		722.63		
Boshea Jr, David J Emp Id 32 Salary 7500.00	Code R	Earning Regular	Hours	Rate	Amount 350.00	Code FITW IL MED SS	Tax Federal Income T Illinois SITW Medicare OASDI	M-8 M-8	Taxable 350.00 350.00 350.00 350.00	5.08 21.70	Code	Deduction	Amount	Type Chk Date Batch Net Dir Dep Chk Amt	Reg 08/01/2017 SM1 323.22 323.22 0.00
	Total Ea	ırnings	0.00		350.00	Total Ta	ixes			26.78	Total Ded	luctions	0.00	Chk/Vcr#	14826
Boshea Jr, David J Emp Id 32 Salary 7500.00	Code R	Earning Regular	Hours	Rate	Amount 7500.00	Code FITW IL MED SS	Tax Federal Income T Illinois SITW Medicare OASDI	Status M-8 M-8	Taxable 6947.37 6947.37 6947.37 6947.37	Amount 954.13 308.01 100.73 430.74	Code 401KL 401KL2 AFLPRE AUTO D4 HSA M-PPO4 V4	Deduction 401K Loan 401K Loan #2 AFLAC - pretax Auto Reimbursen Dental - Fam HSA BluePreferred PP Vision - Fam	Amount 270.00 150.00 113.41 -250.00 32.00 150.00 256.22 1.00	Chk Date Batch Net	Reg 08/16/2017 SM2 4983.76 4983.76 0.00 14941
	Total Ea	ırnings	0.00		7500.00	Total Ta	ixes			1793.61	Total Ded		722.63		
Boshea Jr, David J Emp Id 32 Salary 7500.00	Code R	Earning Regular	Hours	Rate	Amount 350.00	FITW IL MED SS	Tax Federal Income T Illinois SITW Medicare OASDI	Status M-8 M-8	Taxable 350.00 350.00 350.00 350.00	5.08 21.70	Code	Deduction	Amount	Type Chk Date Batch Net Dir Dep Chk Amt	Reg 08/16/2017 SM2 323.22 323.22 0.00
	Total Ea	rnings	0.00		350.00	Total Ta	ixes			26.78	Total Ded	luctions	0.00		14942

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Employee

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Payroll Regis	ster						Compass N.	Iarketin y (175583)	ng Inc			Check Date: Process: Period:	01/02/2013 to 2013010201 12/16/2012 to	to 20201019	Pag 01 34
Boshea Jr, David J Emp Id 32 Salary 7500.00	Code R	Earning Regular	Hours	Rate	Amount 7500.00	FITW IL MED SS	Tax  Federal Income T Illinois SITW Medicare OASDI	Status M-8 M-8	Taxable 6947.37 6947.37 6947.37 6947.37	100.74	401KL 401KL2 AFLPRE AUTO D4 HSA M-PPO4 V4	Deduction  401K Loan #2  AFLAC - pretax  Auto Reimbursen  Dental - Fam  HSA  BluePreferred PP  Vision - Fam	Amount 270.00 150.00 113.41 -250.00 32.00 150.00 256.22 1.00	Type Chk Date Batch Net Dir Dep Chk Amt Chk/Vcr#	Reg 09/01/2017 SM1 4983.75 4983.75 0.00 15061
	Total E	arnings	0.00		7500.00	Total Ta	ixes			1793.62	Total Dec	luctions	722.63		
Boshea Jr,	Code	Earning	Hours	Rate	Amount	Code	Tax	Status	Taxable	Amount	Code	Deduction	Amount	Type	Reg
David J Emp Id 32 Salary 7500.00	R	Regular		7	350.00	FITW IL MED SS	Federal Income T Illinois SITW Medicare OASDI	1	350.00 350.00 350.00 350.00	5.07 21.70				Chk Date Batch Net Dir Dep Chk Amt	09/01/2017 SM1 323.23 323.23 0.00
	Total E	arnings	0.00		350.00	Total Ta	ixes			26.77	Total Ded	luctions	0.00	Chk/Vcr#	15062
Boshea Jr,	Code	Earning	Hours	Rate	Amount	Code	Tax	Status	Taxable	Amount	Code	Deduction	Amount	Type	Reg
David J Emp Id 32 Salary 7500.00	R	Regular		Nate	7500.00	FITW IL MED SS	Federal Income T Illinois SITW Medicare OASDI	F . W. C.	6947.37 6947.37 6947.37 3144.71	954.13 308.01 100.74 194.97	401KL 401KL2 AFLPRE AUTO D4 HSA M-PPO4 V4	401K Loan 401K Loan #2 AFLAC - pretax Auto Reimbursen Dental - Fam HSA BluePreferred PP Vision - Fam	270.00 150.00 113.41 -250.00 32.00 150.00 256.22 1.00	Chk Date Batch Net Dir Dep	09/15/2017 SM2 5219.52 5219.52 0.00 15179
	Total E	arnings	0.00		7500.00	Total Ta	ixes			1557.85	Total Dec	luctions	722.63		
Boshea Jr,	Code	Earning	Hours	Rate	Amount	Code	Tax	Status	Taxable	Amount	Code	Deduction	Amount	Type	Reg
David J Emp Id 32 Salary 7500.00	R	Regular			350.00	FITW IL MED SS	Federal Income T Illinois SITW Medicare OASDI	M-8 M-8	350.00 350.00 350.00	5.07				Chk Date Batch Net Dir Dep Chk Amt	09/15/2017 SM2 344.93 344.93 0.00
	Total E	arnings	0.00		350.00	Total Ta	ixes			5.07	Total Dec	luctions	0.00	Chk/Vcr#	15180
Boshea Jr, David J Emp Id 32 Salary 7500.00	Code KM R	Earning 401k Match Regular	Hours	Rate	Amount 262.50 7500.00	FITW	Tax Federal Income T Illinois SITW Medicare OASDI	Status M-8 M-8	Taxable 6647.37 6647.37 6947.37	Amount 879.13 293.16 100.74	401K 401KL	Deduction  401K  401K Loan #2  AFLAC - pretax  Auto Reimbursen  Dental - Fam  HSA  BluePreferred PP  Vision - Fam	Amount 300.00 270.00 150.00 113.41 -250.00 32.00 150.00 256.22 1.00	Type Chk Date Batch Net Dir Dep Chk Amt Chk/Vcr #	Reg 10/02/2017 SM1 5204.34 5204.34 0.00 15300
	Total E	arnings	0.00		7500.00	Total Ta	ixes			1273.03	Total Ded	luctions	1022.63		

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Payroll Regi	ster						Compass N	Iarketin y (175583)	ng Inc			Check Date: Process: Period:	01/02/2013 to 2013010201 12/16/2012 to	to 20201019	01 3
Boshea Jr, David J Emp Id 32 Salary 7500.00	Code R	Earning Regular	Hours	Rate	Amount 350.00	FITW IL MED SS	Tax Federal Income T Illinois SITW Medicare OASDI	Status M-8 M-8	Taxable 350.00 350.00 350.00	5.08		Deduction	Amount	Type Chk Date Batch Net Dir Dep Chk Amt	Reg 10/02/2017 SM1 344.92 344.92 0.00
Boshea Jr, David J Emp Id 32 Salary 7500.00	Code KM R	Earning 401k Match Regular	Hours	Rate	350.00 Amount 262.50 7500.00	FITW IL MED SS	Tax  Federal Income T Illinois SITW Medicare OASDI	M-8 M-8	Taxable 6647.37 6647.37 6947.37	2000	401KL2 AFLPRE AUTO D4 HSA M-PPO4 V4	Deduction  401K  401K Loan  401K Loan #2  AFLAC - pretax  Auto Reimbursen  Dental - Fam  HSA  BluePreferred PP  Vision - Fam	0.00 Amount 300.00 270.00 150.00 113.41 -250.00 32.00 150.00 256.22 1.00	Chk/Vcr # Type Chk Date Batch Net Dir Dep Chk Amt Chk/Vcr #	15301 Reg 10/16/2017 SM2 5204.35 5204.35 0.00 15420
Boshea Jr, David J Emp Id 32 Salary 7500.00	Code R	Earning Regular	0.00 Hours	Rate	7500.00 Amount 350.00	Code FITW IL MED SS	Tax Federal Income T Illinois SITW Medicare OASDI	Status M-8 M-8	Taxable 350.00 350.00 350.00	1273.02 Amount 5.08	Total Dec	Deduction	Amount	Type Chk Date Batch Net Dir Dep Chk Amt	Reg 10/16/2017 SM2 344.92 344.92 0.00
Boshea Jr, David J Emp Id 32 Salary 7500.00	Total E: Code KM R	Earning  Earning  401k Match  Regular	0.00 Hours	Rate	350.00 Amount 262.50 7500.00	FITW	Tax Federal Income T Illinois SITW Medicare OASDI	M-8 M-8	Taxable 6647.37 6647.37 6947.37	5.08 Amount 879.13 293.16 100.73	401K	Deduction 401K 401K Loan 401K Loan #2	0.00 Amount 300.00 270.00 150.00 113.41 -250.00 32.00 150.00 256.22 1.00	Chk/Vcr# Type Chk Date Batch Net Dir Dep Chk Amt Chk/Vcr#	15421 Reg 11/01/2017 SM1 5204.35 5204.35 0.00 15542
Boshea Jr, David J Emp Id 32 Salary 7500.00	Total E. Code R	arnings Earning Regular	0.00 Hours	Rate	7500.00 Amount 350.00	Code FITW IL MED SS	Tax Federal Income T Illinois SITW Medicare OASDI	Status M-8 M-8	Taxable 350.00 350.00 350.00	1273.02 Amount 5.08	Total Dec		1022.63 Amount	Type Chk Date Batch Net Dir Dep Chk Amt	Reg 11/01/2017 SM1 344.92 344.92 0.00
	Total E	arnings	0.00		350.00	Total Ta	nxes			5.08	Total Dec	luctions	0.00	Chk/Vcr#	15543

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Payroll Regi	ster						Compass N	Iarketin y (175583)	ng Inc			Check Date: Process: Period:	01/02/2013 to 2013010201 12/16/2012 to	to 202010190	
Boshea Jr, David J Emp Id 32 Salary 7500.00	Code KM R	Earning 401k Match Regular	Hours	Rate	Amount 262.50 7500.00	FITW	Tax Federal Income T Illinois SITW Medicare OASDI	M-8 M-8	Taxable 6647.37 6647.37 6947.37	Amount 879.13 293.16 100.74	Code 401K 401KL 401KL2 AFLPRE AUTO D4 HSA M-PPO4 V4	Deduction  401K  401K Loan  401K Loan #2  AFLAC - pretax  Auto Reimbursen  Dental - Fam  HSA  BluePreferred PP  Vision - Fam	Amount 300.00 270.00 150.00 113.41 -250.00 32.00 150.00 256.22 1.00	Chk Date Batch Net Dir Dep	Reg 11/16/2017 SM2 5204.34 5204.34 0.00 15665
	Total E	arnings	0.00	7.7	7500.00	Total Ta	ixes			1273.03	Total Ded	uctions	1022.63		
Boshea Jr, David J Emp Id 32 Salary 7500.00	Code R	Earning Regular	Hours	Rate	Amount 350.00	Code FITW IL MED SS	Tax Federal Income T Illinois SITW Medicare OASDI	M-8 M-8	Taxable 350.00 350.00 350.00	Amount 5.07	Code	Deduction	Amount	Type Chk Date Batch Net Dir Dep Chk Amt	Reg 11/16/2017 SM2 344.93 344.93 0.00
	Total E	arnings	0.00		350.00	Total Ta	ixes			5.07	Total Ded	uctions	0.00	Chk/Vcr#	15666
Boshea Jr, David J Emp Id 32 Salary 7500.00	Code KM R	Earning 401k Match Regular	Hours	Rate	Amount 262.50 7500.00	Code FITW IL MED SS	Tax Federal Income T Illinois SITW Medicare OASDI	M-8 M-8 M-8	Taxable 6647.37 6647.37 6947.37	Amount 879.13 293.16 100.74	Code 401K 401KL 401KL2 AFLPRE AUTO D4 HSA M-PPO4 V4 Total Ded	Deduction  401K  401K Loan  401K Loan #2  AFLAC - pretax  Auto Reimbursen  Dental - Fam  HSA  BluePreferred PP  Vision - Fam	Amount 300.00 270.00 150.00 113.41 -250.00 32.00 150.00 256.22 1.00		Reg 12/01/2017 SM1 5204.34 5204.34 0.00 15790
as a mildin film				10					2-03-1	44457040	A	2.5.6			1-0
Boshea Jr, David J Emp Id 32 Salary 7500.00	Code R	Earning Regular	Hours	Rate	350.00	FITW IL MED SS	Tax Federal Income T Illinois SITW Medicare OASDI	M-8 M-8	Taxable 350.00 350.00 350.00	Amount 5.07	Code	Deduction	Amount	Type Chk Date Batch Net Dir Dep Chk Amt	Reg 12/01/2017 SM1 344.93 344.93 0.00
	Total E	arnings	0.00		350.00	Total Ta	ixes			5.07	Total Ded	uctions	0.00	Chk/Vcr#	15791

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Boshea Jr

Employee

Payroll Regi	ster						Compass N. Compan	larketin y (175583)	g Inc			Check Date: Process: Period:	01/02/2013 to 2013010201 12/16/2012 to	to 202010190	01 346
Boshea Jr, David J Emp Id 32 Salary 7500.00	Code KM R	Earning 401k Match Regular	Hours	Rate	Amount 262.50 7500.00	Code FITW IL MED SS	Tax Federal Income T Illinois SITW Medicare OASDI	Status M-8 M-8	Taxable 6647.37 6647.37 6947.37	293.16	401K 401KL 401KL2 AFLPRE AUTO D4 HSA M-PPO4 V4	Deduction 401K 401K Loan #2 AFLAC - pretax Auto Reimbursen Dental - Fam HSA BluePreferred PP Vision - Fam	Amount 300.00 270.00 150.00 113.41 -250.00 32.00 150.00 256.22 1.00	Chk Date Batch Net Dir Dep	Reg 12/15/2017 SM2 5204.34 5204.34 0.00 15912
	Total E	arnings	0.00		7500.00	Total Ta	ixes			1273.03	Total Ded	uctions	1022.63		
Boshea Jr, David J Emp Id 32 Salary 7500.00	Code R	Earning Regular	Hours	Rate	Amount 350.00	Code FITW IL MED SS	Tax Federal Income T Illinois SITW Medicare OASDI	M-8 M-8	Taxable 350.00 350.00 350.00	Amount 5.07	Code	Deduction	Amount	Type Chk Date Batch Net Dir Dep Chk Amt	Reg 12/15/2017 SM2 344.93 344.93 0.00
	Total E	arnings	0.00		350.00	Total Ta	ixes			5.07	Total Ded	uctions	0.00		15913
Boshea Jr, David J Emp Id 32 Salary 7500.00	Code KM R	Earning 401k Match Regular	Hours	Rate	Amount 262.50 7500.00	Code FITW IL MED SS	Tax Federal Income T Illinois SITW Medicare OASDI	Status M-8 M-8	Taxable 6533.98 6533.98 6833.98 6833.98	850.79 290.43 99.09	Code 401K 401KL 401KL2 AFLPRE AUTO D4 FSA HSA M-PPO4 V4	Deduction  401K  401K Loan  401K Loan #2  AFLAC - pretax  Auto Reimbursen  Dental - Fam  FSA  HSA  BluePreferred PP  Vision - Fam	Amount 300.00 270.00 150.00 113.41 -250.00 34.97 110.42 150.00 256.22 1.00	Chk Date Batch Net Dir Dep Chk Amt	Reg 01/02/2018 SM1 4699.96 4699.96 0.00 16036
5.4512.	Total E	7 - 7 L	0.00					7.0	Naw W						7.2
Boshea Jr, David J Emp Id 32 Salary 7500.00	Code R	Earning Regular	Hours	Rate	Amount 350.00	Code FITW IL MED SS	Tax Federal Income T Illinois SITW Medicare OASDI	M-8 M-8	Taxable 350.00 350.00 350.00 350.00	5.08 21.70	Code	Deduction	Amount	Type Chk Date Batch Net Dir Dep Chk Amt	Reg 01/02/2018 SM1 323.22 323.22 0.00
	Total E	arnings	0.00		350.00	Total Ta	ixes			26.78	Total Ded	uctions	0.00	Chk/Vcr#	16037

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Employee

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Payroll Regi	ster						Compass N	Iarketin y (175583)	ng Inc			Check Date: Process: Period:	01/02/2013 to 2013010201 12/16/2012 to	to 202010190	01 347
Boshea Jr, David J Emp Id 32 Salary 7500.00	Code HSA KM R	Earning HSA - Employer 401k Match Regular	Hours	Rate	Amount 3000.00 262.50 7500.00	FITW IL	Tax Federal Income T Illinois SITW Medicare OASDI	Status M-8 M-8	Taxable 6754.94 6754.94 7054.94 7054.94	Amount 906.03 301.37 102.29 437.40	401K 401KL 401KL2 AFLPRE AUTO D4 FSA HSA M-PPO4 V4	Deduction 401K 401K Loan 401K Loan #2 AFLAC - pretax Auto Reimbursen Dental - Fam FSA HSA BluePreferred PP Vision - Fam	-250.00	Chk Date Batch Net Dir Dep	Reg 01/16/2018 SM2 4837.85 4837.85 0.00 16154
	Total E	arnings	0.00		7500.00	Total Ta	ixes			1747.09	Total Dec	luctions	915.06		
Boshea Jr, David J Emp Id 32 Salary 7500.00	Code R	Earning Regular	Hours	Rate	Amount 350.00	Code FITW IL MED SS	Tax Federal Income T Illinois SITW Medicare OASDI	M-8 M-8	Taxable 350.00 350.00 350.00 350.00	5.08 21.70		Deduction	Amount	Type Chk Date Batch Net Dir Dep Chk Amt	Reg 01/16/2018 SM2 323.22 323.22 0.00
	Total E	arnings	0.00		350.00	Total Ta	ixes			26.78	Total Dec	luctions	0.00	Chk/Vcr#	16155
Boshea Jr, David J Emp Id 32 Salary 7500.00	Code KM R	Earning 401k Match Regular	Hours	Rate	Amount 262.50 7500.00	MED SS	Tax Federal Income T Illinois SITW Medicare OASDI	Status M-8 M-8	Taxable 6644.40 6644.40 6944.40 6944.40	713.18 295.90 100.69 430.56	401K 401KL 401KL2 AFLPRE AUTO D4 HSA M-PPO4 V4	Deduction 401K 401K Loan 401K Loan #2 AFLAC - pretax Auto Reimbursen Dental - Fam HSA BluePreferred PP Vision - Fam	-250.00 34.97 150.00 256.22 1.00	Chk Date Batch Net Dir Dep Chk Amt	Reg 02/01/2018 SM1 4934.07 4934.07 0.00 16304
	Total E	7 L T 10 L 10	0.00		7500.00	Total Ta				1540.33	Total Dec		1025.60		
Boshea Jr, David J Emp Id 32 Salary 7500.00	Code R	Earning Regular	Hours	Rate	Amount 350.00	Code FITW IL MED SS	Tax Federal Income T Illinois SITW Medicare OASDI	M-8 M-8	Taxable 350.00 350.00 350.00 350.00	5.08 21.70		Deduction	Amount	Type Chk Date Batch Net Dir Dep Chk Amt	Reg 02/01/2018 SM1 323.22 323.22 0.00
	Total E	arnings	0.00		350.00	Total Ta	ixes			26.78	Total Dec	luctions	0.00	Chk/Vcr#	16305

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Employee

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Payroll Regi	ster						Compass N	Iarketin ny (175583)	g Inc			Check Date: Process: Period:	01/02/2013 to 2013010201 12/16/2012 to	to 20201019	01 348
Boshea Jr; David J Emp Id 32 Salary 7500.00	Code KM R	Earning 401k Match Regular	Hours	Rate	262.50	Code FITW IL MED SS	Tax Federal Income T Illinois SITW Medicare OASDI	M-8 M-8	Taxable 6644.40 6644.40 6944.40 6944.40	Amount 713.18 295.90 100.69 430.55	401K	Deduction 401K 401K Loan 401K Loan #2 AFLAC - pretax Auto Reimbursen Dental - Fam HSA BluePreferred PP Vision - Fam	Amount 300.00 270.00 150.00 113.41 -250.00 34.97 150.00 256.22 1.00	Chk Date Batch Net Dir Dep Chk Amt	Reg 02/16/2018 SM2 4934.08 4934.08 0.00 16428
	Total E	arnings	0.00	_	7500.00	Total Ta	ixes			1540.32	Total Ded		1025.60		
Boshea Jr, David J Emp Id 32 Salary 7500.00	Code R	Earning Regular	Hours	Rate	Amount 350.00	Code FITW IL MED SS	Tax  Federal Income T Illinois SITW Medicare OASDI	Status M-8 M-8	Taxable 350.00 350.00 350.00 350.00	5.08 21.70	Code	Deduction	Amount	Chk Date Batch Net Dir Dep	Reg 02/16/2018 SM2 323.22 323.22
	Total Ea	arnings	0.00		350.00	Total Ta	ixes			26.78	Total Ded	uctions	0.00	Chk Amt Chk/Vcr #	0.00 16429
Boshea Jr; David J Emp Id 32 Salary 7500.00	Code KM R	Earning 401k Match Regular	Hours	Rate	262.50 7500.00	Code FITW IL MED SS	Tax Federal Income T Illinois SITW Medicare OASDI	M-8 M-8	Taxable 6644.40 6644.40 6944.40 6944.40	Amount 713.18 295.90 100.69 430.55	Code 401K 401KL 401KL2 AFLPRE AUTO D4 HSA M-PPO4 V4 Total Ded	Deduction  401K  401K Loan #2  AFLAC - pretax  Auto Reimbursen  Dental - Fam  HSA  BluePreferred PP  Vision - Fam  uctions	Amount 300.00 270.00 150.00 113.41 -250.00 34.97 150.00 256.22 1.00	Chk Date Batch	Reg 03/01/2018 SM1 4934.08 4934.08 0.00 16554
Boshea Jr; David J Emp Id 32 Salary 7500.00	Code KM R	Earning 401k Match Regular	Hours	Rate	300.00	FITW	Tax  Federal Income T Illinois SITW Medicare OASDI	M-8 M-8	Taxable 6194.40 6194.40 6944.40 6944.40	Amount 614.18 273.62 100.69 430.55	Code 401K 401KL 401KL2 AFLPRE AUTO D4 HSA M-PPO4 V4	Deduction  401K  401K Loan #2  AFLAC - pretax  Auto Reimbursen  Dental - Fam  HSA  BluePreferred PP  Vision - Fam	Amount 750.00 270.00 150.00 113.41 -250.00 34.97 150.00 256.22 1.00	Chk Date Batch Net Dir Dep Chk Amt	Reg 03/16/2018 SM2 4605.36 4605.36 0.00 16669
	Total Ea	arnings	0.00		7500.00	Total Ta	ixes			1419.04	Total Ded	uctions	1475.60		

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Payroll Regi	ister						Compass N	Iarketii y (175583)	ng Inc			Check Date: Process: Period:	01/02/2013 to 2013010201 12/16/2012 to	to 20201019	01 349
Boshea Jr, David J Emp Id 32 Salary 7500.00	Code R	Earning Regular	Hours	Rate	Amount 350.00	Code FITW IL MED SS	Tax Federal Income T Illinois SITW Medicare OASDI	Status M-8 M-8	Taxable 350.00 350.00 350.00 350.00	5.08 21.70	Code	Deduction	Amount	Type Chk Date Batch Net Dir Dep Chk Amt	Reg 03/16/2018 SM2 323.22 323.22 0.00
	Total E	arnings	0.00		350.00	Total Ta	axes	.,		26.78	Total Dec	luctions	0.00	Chk/Vcr#	16670
Boshea Jr, David J Emp Id 32 Salary 7500.00	Code R	Earning Regular	Hours	Rate	Amount 350.00	Code FITW IL MED SS	Tax Federal Income T Illinois SITW Medicare OASDI	Status M-8 M-8	Taxable 350.00 350.00 350.00 350.00	5.07 21.70	Code	Deduction	Amount	Type Chk Date Batch Net Dir Dep Chk Amt	Reg 03/16/2018 SM2 323.23 323.23 0.00
	Total E	arnings	0.00		350.00	Total T	axes			26.77	Total Dec	luctions	0.00	Chk/Vcr#	16671
Boshea Jr, David J Emp Id 32 Salary 7500.00	Code KM R	Earning 401k Match Regular	Hours	Rate	Amount 300.00 7500.00	FITW	Tax Federal Income T Illinois SITW Medicare OASDI	M-8 M-8	Taxable 6194.40 6194.40 6944.40 6944.40	Amount 614.18 273.62 100.70 430.56	401K 401KL	Deduction 401K 401K Loan 401K Loan #2 AFLAC - pretax Auto Reimbursen Dental - Fam HSA BluePreferred PP Vision - Fam	Amount 750.00 270.00 150.00 113.41 -250.00 34.97 150.00 256.22 1.00 1475.60	Chk Date Batch	Reg 04/02/2018 SM1 4605.34 4605.34 0.00 16795
Boshea Jr,	Code	Earning	Hours	Rate	Amount	Code	Tax	Status	Taxable	Amount	Code	Deduction	Amount	Type	Reg
David J Emp Id 32 Salary 7500.00	R	Regular			350.00	FITW IL MED SS	Federal Income T Illinois SITW Medicare OASDI	M-8 M-8	350.00 350.00 350.00 350.00	5.07 21.70				Chk Date Batch Net Dir Dep Chk Amt	04/02/2018 SM1 323.23 323.23 0.00
	Total E	arnings	0.00		350.00	Total T				26.77	Total Dec		0.00	Chk/Vcr#	16796
Boshea Jr, David J Emp Id 32 Salary 7500.00	Code KM R	Earning 401k Match Regular	Hours	Rate	Amount 300.00 7500.00	Code FITW IL MED SS	Tax  Federal Income T Illinois SITW Medicare OASDI	M-8 M-8 M-8	Taxable 6194.40 6194.40 6944.40 6944.40	100.70	401K 401KL	Deduction  401K  401K Loan  401K Loan #2  AFLAC - pretax  Auto Reimbursen  Dental - Fam  HSA  BluePreferred PP  Vision - Fam	Amount 750.00 270.00 150.00 113.41 -250.00 34.97 150.00 256.22 1.00	Chk Date Batch Net Dir Dep Chk Amt	Reg 04/16/2018 SM2 4605.35 4605.35 0.00 16920
	Total E	arnings	0.00		7500.00	Total Ta	axes			1419.05	Total Dec	luctions	1475.60		

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Payroll Regi	ster						Compass N	Iarketin ny (175583)	g Inc			Check Date: Process: Period:	01/02/2013 to 2013010201 12/16/2012 to	to 20201019	01 350
Boshea Jr,	Code	Earning	Hours	Rate	Amount	Code	Tax	Status	Taxable	Amount	Code	Deduction	Amount	Туре	Reg
David J	KM	401k Match			150.00	FITW	Federal Income T	M-8	2819.40	98.70	401K	401K	375.00	Chk Date	05/01/2018
Emp Id 32	R	Regular			3750.00	IL	Illinois SITW	M-8	2819.40	106.56	401KL	401K Loan	270.00	Batch	SM1
Salary 7500.00						MED	Medicare		3194.40	46.32	401KL2	401K Loan #2	150.00	Net	2199.77
						SS	OASDI		3194.40	198.05	AFLPRE	AFLAC - pretax		Dir Dep	2199.77
											AUTO	Auto Reimbursen	-250.00	Chk Amt	0.00
											D4	Dental - Fam	34.97	Chk/Vcr#	17037
											HSA	HSA	150.00		
											M-PPO4	BluePreferred PP	256.22		
	Total E	arnings	0.00		3750.00	Total Ta	ixes			449.63	V4 Total Ded	Vision - Fam luctions	1.00		
Boshea Jr,	Code	Earning	Hours	Rate	Amount	Code	Tax	Status	Taxable	Amount	Code	Deduction	Amount	Type	Reg
David J	R	Regular			3750.00	FITW	Federal Income T		3750.00	210.38				Chk Date	05/04/2018
Emp Id 32						IL	Illinois SITW	M-8	3750.00	152.63				Batch	ADJ
Salary 7500.00						MED	Medicare		3750.00	54.37				Net	3100.12
						SS	OASDI		3750.00	232.50				Dir Dep	3100.12
	Total E		0.00		3750.00	Total Ta				649.88	Total Ded		0.00	Chk Amt Chk/Vcr#	0.00 17142
	Iotal E				3/30.00	Total 12				049.00	Total Ded		0.00		
Boshea Jr,	Code	Earning	Hours	Rate	Amount	Code	Tax	Status	Taxable	Amount	Code	Deduction	Amount	Туре	Reg
David J	R	Regular			350.00	FITW	Federal Income T		350.00					Chk Date	05/04/2018
Emp Id 32						IL	Illinois SITW	M-8	350.00	5.00				Batch	ADJ
Salary 7500.00						MED SS	Medicare OASDI		350.00 350.00	5.08 21.70				Net Dir Dep	323.22 323.22
						33	OASDI		330.00	21.70				Chk Amt	0.00
	Total E	arnings	0.00		350.00	Total Ta	ixes			26.78	Total Ded	luctions	0.00		17143
Boshea Jr,	Code	Earning	Hours	Rate	Amount		Tax	Status	Taxable	Amount	Code	Deduction	Amount	Type	Reg
David J	KM	401k Match			300.00	FITW	Federal Income T	M-8	6194.40	614.18	401K	401K	750.00	Chk Date	05/16/2018
Emp Id 32	R	Regular			7500.00		Illinois SITW	M-8	6194.40	273.62	401KL	401K Loan	270.00	Batch	SM2
Salary 7500.00						MED	Medicare		6944.40	100.69		401K Loan #2	150.00		4605.35
						SS	OASDI		6944.40	430.56	AFLPRE	AFLAC - pretax	113.41	Dir Dep	4605.35
											AUTO	Auto Reimbursen	-250.00	Chk Amt	0.00
											D4	Dental - Fam	34.97	Chk/Vcr#	17170
											HSA	HSA	150.00		
											M-PPO4 V4	BluePreferred PP Vision - Fam	256.22		
	Total E	in	0.00		7500.00	Total Ta				1419.05	Total Ded		1.00		
	Ittal E	ur mings	0.00		/300.00	Total 12	IAC)			1417.03	Idiai Ded	шеновъ	1475.00		

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Payroll Regi	ster						Compass N	Iarketin y (175583)	ng Inc			Check Date: Process: Period:	01/02/2013 to 2013010201 12/16/2012 to	to 20201019	01 3
Boshea Jr, David J Emp Id 32 Salary 7500.00	Code KM R	Earning 401k Match Regular	Hours	Rate	Amount 300.00 7500.00	FITW	Tax Federal Income T Illinois SITW Medicare OASDI	Status M-8 M-8	Taxable 6194.40 6194.40 6944.40 6944.40	Amount 614.18 273.62 100.69 430.55	Code 401K 401KL 401KL2 AFLPRE AUTO D4 HSA M-PPO4 V4	Deduction 401K 401K Loan 401K Loan #2 AFLAC - pretax Auto Reimbursen Dental - Fam HSA BluePreferred PP Vision - Fam	Amount 750.00 270.00 150.00 113.41 -250.00 34.97 150.00 256.22 1.00	Chk Date Batch Net Dir Dep	Reg 06/01/2018 SM1 4605.36 4605.36 0.00 17290
	Total E	arnings	0.00	7.7	7500.00	Total T	ixes			1419.04	Total Ded	luctions	1475.60		
Boshea Jr, David J Emp Id 32 Salary 7500.00	Code R	Earning Regular	Hours	Rate	Amount 350.00		Tax Federal Income T Illinois SITW Medicare OASDI	M-8 M-8	Taxable 350.00 350.00 350.00 350.00	5.08 21.70	Code	Deduction.	Amount	Type Chk Date Batch Net Dir Dep Chk Amt	Reg 06/01/2018 SM1 323.22 323.22 0.00
	Total E	arnings	0.00		350.00	Total T	ixes			26.78	Total Ded	luctions	0.00		17291
Boshea Jr, David J Emp Id 32 Salary 7500.00	Code R	Earning Regular	Hours	Rate	350.00 350.00	Code FITW IL MED SS	Tax Federal Income T Illinois SITW Medicare OASDI	Status M-8 M-8	Taxable 350.00 350.00 350.00 350.00	5.07 21.70 26.77	Code Total Dec	Deduction	Amount	Type Chk Date Batch Net Dir Dep Chk Amt Chk/Vcr #	Reg 06/01/2018 SM1 323.23 323.23 0.00 17292
				Date				Cert	T11-						
Boshea Jr, David J Emp Id 32 Salary 7500.00	Code KM R	Earning 401k Match Regular	Hours	Rate	Amount 300.00 7500.00	FITW	Tax Federal Income T Illinois SITW Medicare OASDI	M-8 M-8	Taxable 6569.40 6569.40 6944.40 6944.40	Amount 696.68 292.19 100.70 430.55	Code 401K 401KL 401KL2 AFLPRE AUTO D4 HSA M-PPO4 V4	Deduction  401K  401K Loan  401K Loan #2  AFLAC - pretax  Auto Reimbursen  Dental - Fam  HSA  BluePreferred PP  Vision - Fam	Amount 375.00 270.00 150.00 113.41 -250.00 34.97 150.00 256.22 1.00	Chk Date Batch Net Dir Dep Chk Amt	Reg 06/15/2018 SM2 4879.28 4879.28 0.00 17406
	Total E	arnings	0.00		7500.00	Total T	ixes			1520.12	Total Ded		1100.60		
Boshea Jr, David J Emp Id 32 Salary 7500.00	Code R	Earning Regular	Hours	Rate	Amount 350.00	Code FITW IL MED SS	Tax Federal Income T Illinois SITW Medicare OASDI	Status M-8 M-8	Taxable 350.00 350.00 350.00 350.00	5.07 21.70	Code	Deduction	Amount	Type Chk Date Batch Net Dir Dep Chk Amt	Reg 06/15/2018 SM2 323.23 323.23 0.00
	Total E	arnings	0.00		350.00	Total Ta	ixes			26.77	Total Ded	luctions	0.00	Chk/Vcr#	17407

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Payroll Regi	ster						Compass N	Iarketin y (175583)	ng Inc			Check Date: Process: Period:	01/02/2013 to 2013010201 12/16/2012 to	to 202010190	0
Boshea Jr, David J Emp Id 32 Salary 7500.00	Code KM R	Earning 401k Match Regular	Hours	Rate	Amount 300.00 7500.00	FITW IL MED SS	Tax Federal Income T Illinois SITW Medicare OASDI	M-8 M-8	Taxable 6569.40 6569.40 6944.40 6944.40		401K 401KL 401KL2 AFLPRE AUTO D4 HSA M-PPO4 V4	Deduction  401K  401K Loan  401K Loan #2  AFLAC - pretax  Auto Reimbursen  Dental - Fam  HSA  BluePreferred PP  Vision - Fam	-250.00 34.97 150.00 256.22 1.00	Chk Date Batch	Reg 07/02/2018 SM1 4879.28 4879.28 0.00 17535
	Total E	arnings	0.00		7500.00	Total Ta	ixes			1520.12	Total Ded	uctions	1100.60		
Boshea Jr, C David J R Emp Id 32 Salary 7500.00	Code R	Earning Regular	Hours	Rate	Amount 350.00	FITW IL MED SS	Tax Federal Income T Illinois SITW Medicare OASDI	M-8 M-8	Taxable 350.00 350.00 350.00 350.00	5.07 21.70	Code	Deduction	Amount	Type Chk Date Batch Net Dir Dep Chk Amt	Reg 07/02/2018 SM1 323.23 323.23 0.00
	Total E	arnings	0.00		350.00	Total Ta	ixes			26.77	Total Ded	uctions	0.00	Chk/Vcr#	17536
Boshea Jr, David J Emp Id 32 Salary 7500.00	Code KM R	Earning 401k Match Regular	Hours	Rate	Amount 300.00 7500.00	Code FITW IL MED SS	Tax Federal Income T Illinois SITW Medicare OASDI	M-8 M-8 M-8	Taxable 6569.40 6569.40 6944.40 6944.40	Amount 696.68 292.19 100.69 430.56	Code 401K 401KL 401KL2 AFLPRE AUTO D4 HSA M-PPO4 V4	Deduction  401K 401K Loan 401K Loan #2 AFLAC - pretax Auto Reimbursen Dental - Fam HSA BluePreferred PP Vision - Fam	Amount 375.00 270.00 150.00 113.41 -250.00 34.97 150.00 256.22 1.00	Dir Dep Chk Amt	Reg 07/16/2018 SM2 4879.28 4879.28 0.00 17655
as a militim of the				10					7200	(10.000.01.01.01.01.01					1-0
Boshea Jr, David J Emp Id 32 Salary 7500.00	Code R	Earning Regular	Hours	Rate	350.00	Code FITW IL MED SS	Tax Federal Income T Illinois SITW Medicare OASDI	M-8 M-8	Taxable 350.00 350.00 350.00 350.00	5.08 21.70	Code	Deduction	Amount	Type Chk Date Batch Net Dir Dep Chk Amt	Reg 07/16/2018 SM2 323.22 323.22 0.00
	Total E	arnings	0.00		350.00	Total Ta	ixes			26.78	Total Ded	uctions	0.00	Chk/Vcr#	17656

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Payroll Regi	ster						Compass N	Iarketin ny (175583)	g Inc			Check Date: Process: Period:	01/02/2013 to 2013010201 12/16/2012 to	to 20201019	01 353
Boshea Jr,	Code	Earning	Hours	Rate	Amount	Code	Tax	Status	Taxable	Amount	Code	Deduction	Amount	Туре	Reg
David J	KM	401k Match			300.00	FITW	Federal Income T	57.97	6569.40	696.68	401K	401K	375.00	Chk Date	08/01/2018
Emp Id 32	R	Regular			7500.00	IL	Illinois SITW	M-8	6569.40	292.19		401K Loan	270.00	Batch	SM1
Salary 7500.00						MED	Medicare		6944.40	100.69	401KL2	401K Loan #2	150.00		4879.29
						SS	OASDI		6944.40	430.55	AFLPRE	AFLAC - pretax	113.41	Dir Dep	4879.29
											AUTO	Auto Reimbursen	-250.00	Chk Amt	0.00
											D4	Dental - Fam	34.97	Chk/Vcr#	17782
											HSA	HSA	150.00		
											M-PPO4	BluePreferred PP	256.22		
	TAIR		0.00		7500.00	T . IT				1520.11	V4 Total Ded	Vision - Fam	1.00		
	Total E		0.00	200	7500.00	Total Ta		23.00	2 61	1520.11			1100.60		
Boshea Jr,	Code	Earning	Hours	Rate	Amount		Tax	Status	Taxable	Amount		Deduction	Amount		Reg
David J	KM	401k Match			300.00	FITW	Federal Income T		6569.40	696.68	401K	401K	375.00 270.00	Chk Date Batch	08/16/2018
Emp Id 32	R	Regular			7500.00		Illinois SITW	M-8	6569.40	292.19		401K Loan			SM2
Salary 7500.00						MED SS	Medicare OASDI		6944.40 6944.40	100.70	401KL2 AFLPRE	401K Loan #2 AFLAC - pretax	150.00 113.41	Net Dir Dep	4879.28 4879.28
						33	UASDI		0944.40	430.33	AUTO	Artac - pretax Auto Reimbursen	-250.00	Chk Amt	0.00
											D4	Dental - Fam	34 97	Chk/Vcr#	17903
											HSA	HSA	150.00	CIIK VCI II	17903
											M-PPO4	BluePreferred PP	256.22		
											V4	Vision - Fam	1.00		
	Total E	arnings	0.00		7500.00	Total Ta	ixes			1520.12	Total Ded	The state of the s	1100.60		
Boshea Jr,	Code	Earning	Hours	Rate	Amount	Code	Tax	Status	Taxable	Amount	Code	Deduction	Amount	Туре	Reg
David J	KM	401k Match			14.00	FITW	Federal Income T	M-8	219.09		401K	401K	17.50	Chk Date	08/16/2018
Emp Id 32	R	Regular			350.00	IL	Illinois SITW	M-8	219.09		401KL	401K Loan	270.00	Batch	SM2
Salary 7500.00						MED	Medicare		236.59	3.43		401K Loan #2	150.00	Net	30.99
						SS	OASDI		236.59	14.67		AFLAC - pretax		Dir Dep	30.99
											AUTO	Auto Reimbursen	-250.00	Chk Amt	0.00
	Total E	arnings	0.00		350.00	Total Ta	ixes			18.10	Total Ded	luctions	300.91	Chk/Vcr#	17904
Boshea Jr,	Code	Earning	Hours	Rate	Amount		Tax	Status	Taxable	Amount	Code	Deduction	Amount		Reg
David J	KM	401k Match			300.00	FITW	Federal Income T		6569.40	696.68	401K	401K	375.00	Chk Date	09/04/2018
Emp Id 32	R	Regular			7500.00		Illinois SITW	M-8	6569.40	292.19		401K Loan	270.00	Batch	SM1
Salary 7500.00						MED	Medicare		6944.40	100.69	401KL2	401K Loan #2	150.00	Net	4879.29
						SS	OASDI		6944.40	430.55	AFLPRE	AFLAC - pretax	113.41	Dir Dep	4879.29
											AUTO	Auto Reimbursen	-250.00	Chk Amt	0.00
											D4	Dental - Fam	34.97	Chk/Vcr#	18032
											HSA	HSA	150.00		
											M-PPO4	BluePreferred PP	256.22		
	TOTAL	7	0.00		7500.00	Total Ta	200			1520.11	V4 Total Ded	Vision - Fam	1.00		
	Iotal E	arnings	0.00		/500.00	total 1	ixes			1520.11	Total Dec	iucuons	1100.00		

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Payroll Regi	ster						Compass N	Iarketin ny (175583)	g Inc			Check Date: Process: Period:	01/02/2013 to 2013010201 12/16/2012 to	to 202010190	01 3
Boshea Jr, David J Emp Id 32 Salary 7500.00	Code R	Earning Regular	Hours	Rate	Amount 350.00	Code FITW IL MED SS	Tax Federal Income T Illinois SITW Medicare OASDI	Status M-8 M-8	Taxable 350.00 350.00 350.00 350.00	5.08 21.70	Code	Deduction	Amount	Type Chk Date Batch Net Dir Dep Chk Amt	09/04/2018 SM1 323.22 323.22 0.00
	Total E	arnings	0.00		350.00	Total Ta	ixes			26.78	Total Ded	luctions	0.00	Chk/Vcr#	18033
Boshea Jr, David J Emp Id 32 Salary 7500.00	Code R	Earning Regular	Hours	Rate	Amount 350.00	Code FITW IL MED SS	Tax Federal Income T Illinois SITW Medicare OASDI	Status M-8 M-8	Taxable 350.00 350.00 350.00 350.00	5.07 21.70	Code	Deduction	Amount	Type Chk Date Batch Net Dir Dep Chk Amt	09/04/2018 SM1 323.23 323.23 0.00
	Total E	arnings	0.00		350.00	Total Ta	ixes			26.77	Total Ded	luctions	0.00	Chk/Vcr#	18034
Boshea Jr, David J Emp Id 32 Salary 7500.00	Code KM R	Earning 401k Match Regular	Hours	Rate	Amount 300.00 7500.00	Code FITW IL MED SS	Tax Federal Income T Illinois SITW Medicare OASDI	Status M-8 M-8	Taxable 6569.40 6569.40 6944.40 4858.49	Amount 696.68 288.47 100.70 301.23	Code 401K 401KL 401KL2 AFLPRE AUTO D4 HSA M-PPO4 V4 Total Dec	Deduction 401K 401K Loan 401K Loan #2 AFLAC - pretax Auto Reimbursen Dental - Fam HSA BluePreferred PP Vision - Fam luctions	Amount 375.00 270.00 150.00 113.41 -250.00 34.97 150.00 256.22 1.00	Chk Date Batch Net Dir Dep	Reg 09/17/2018 SM2 5012.32 5012.32 0.00 18145
Boshea Jr,	Code	Earning	Hours	Rate	Amount	Code	Tax	Status	Taxable	Amount	Code	Deduction	Amount	Type	Reg
David J Emp Id 32 Salary 7500.00	KM R	401k Match Regular			300.00 7500.00	FITW IL MED SS	Federal Income T Illinois SITW Medicare OASDI	M-8 M-8	6569.40 6569.40 6944.40	696.68 288.47 100.69	401KL 401KL2 AFLPRE AUTO D4 HSA M-PPO4 V4	401K Loan 401K Loan #2 AFLAC - pretax Auto Reimbursen Dental - Fam HSA BluePreferred PP Vision - Fam	375.00 270.00 150.00 113.41 -250.00 34.97 150.00 256.22 1.00	Chk Date Batch Net Dir Dep	10/01/2018 SM1 5313.56 5313.56 0.00 18257
	Total Ea	arnings	0.00		7500.00	Total Ta	ixes			1085.84	Total Dec		1100.60		
Boshea Jr, David J Emp Id 32 Salary 7500.00	Code R	Earning Regular	Hours	Rate	Amount 350.00	Code FITW IL MED SS	Tax Federal Income T Illinois SITW Medicare OASDI	Status M-8 M-8	Taxable 350.00 350.00 350.00	Amount 5.07	Code	Deduction	Amount	Type Chk Date Batch Net Dir Dep Chk Amt	Reg 10/01/2018 SM1 344.93 344.93 0.00
	Total E	arnings	0.00		350.00	Total Ta	ixes			5.07	Total Ded	luctions	0.00		18258

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Employee

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Payroll Regi	ster						Compass N	Iarketin y (175583)	g Inc			Check Date: Process: Period:	01/02/2013 to 2013010201 12/16/2012 to	to 20201019	01 355
Boshea Jr, David J Emp Id 32 Salary 7500.00	Code KM R	Earning 401k Match Regular	Hours	Rate	Amount 300.00 7500.00	FITW IL MED SS	Tax Federal Income T Illinois SITW Medicare OASDI	Status M-8 M-8	Taxable 6569.40 6569.40 6944.40	Amount 696.68 288.47 100.70	401K 401KL 401KL2 AFLPRE AUTO D4 HSA M-PPO4 V4	Deduction 401K 401K Loan 401K Loan #2 AFLAC - pretax Auto Reimbursen Dental - Fam HSA BluePreferred PP Vision - Fam	Amount 375.00 270.00 150.00 113.41 -250.00 34.97 150.00 256.22 1.00	Chk Date Batch Net Dir Dep Chk Amt	Reg 10/16/2018 SM2 5313.55 5313.55 0.00 18371
	Total E	arnings	0.00		7500.00	Total Ta	ixes			1085.85	Total Ded	uctions	1100.60		
Boshea Jr, David J Emp Id 32 Salary 7500.00	Code R	Earning Regular	Hours	Rate	Amount 350.00	Code FITW IL MED SS	Tax  Federal Income T Illinois SITW Medicare OASDI	M-8 M-8	Taxable 350.00 350.00 350.00	Amount 5.07	Code	Deduction	Amount	Type Chk Date Batch Net Dir Dep Chk Amt	Reg 10/16/2018 SM2 344.93 344.93 0.00
	Total E	arnings	0.00		350.00	Total Ta	ixes			5.07	Total Ded	uctions	0.00	Chk/Vcr#	18372
Boshea Jr, David J Emp Id 32 Salary 7500.00	Code KM R	Earning 401k Match Regular	Hours	Rate	Amount 300.00 7500.00	FITW	Tax Federal Income T Illinois SITW Medicare OASDI	Status M-8 M-8	Taxable 6569.40 6569.40 6944.40	Amount 696.68 288.47 100.70	Code 401K 401KL 401KL2 AFLPRE AUTO D4 HSA M-PPO4 V4	Deduction 401K 401K Loan 401K Loan #2 AFLAC - pretax Auto Reimbursen Dental - Fam HSA BluePreferred PP Vision - Fam	Amount 375.00 270.00 150.00 113.41 -250.00 34.97 150.00 256.22 1.00 1100.60	Chk Date Batch	Reg 11/01/2018 SM1 5313.55 5313.55 0.00 18487
40.0	Total Ea			70			ACCOUNT OF THE PARTY OF THE PAR		7000	777	A STATE OF		530000		1-17
Boshea Jr; David J Emp Id 32 Salary 7500.00	Code KM R	Earning 401k Match Regular	Hours	Rate	300.00 7500.00	FITW IL MED SS	Tax Federal Income T Illinois SITW Medicare OASDI	M-8 M-8	Taxable 6569.40 6569.40 6944.40	Amount 696.68 288.47 100.69	Code 401K 401KL 401KL2 AFLPRE AUTO D4 HSA M-PPO4 V4	Deduction  401K  401K Loan  401K Loan #2  AFLAC - pretax  Auto Reimbursen  Dental - Fam  HSA  BluePreferred PP  Vision - Fam	Amount 375.00 270.00 150.00 113.41 -250.00 34.97 150.00 256.22 1.00	Chk Date Batch Net Dir Dep Chk Amt	Reg 11/16/2018 SM2 5313.56 5313.56 0.00 18596
	Total E	arnings	0.00		7500.00	Total Ta	ixes			1085.84	Total Ded	uctions	1100.60		

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Employee

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Payroll Regi	ster						Compass N	Iarketin ny (175583)	g Inc			Check Date: Process: Period:	01/02/2013 to 2013010201 12/16/2012 to	to 202010190	01 3
Boshea Jr, David J Emp Id 32 Salary 7500.00	Code R	Earning Regular	Hours	Rate	Amount 350.00	Code FITW IL MED SS	Tax Federal Income T Illinois SITW Medicare OASDI	Status M-8 M-8	Taxable 350.00 350.00 350.00	Amount 5.08	Code	Deduction	Amount	Type Chk Date Batch Net Dir Dep Chk Amt	Reg 11/16/2018 SM2 344.92 344.92 0.00
	Total E	arnings	0.00		350.00	Total Ta	ixes			5.08	Total Ded	luctions	0.00	Chk/Vcr#	18597
Boshea Jr, David J Emp Id 32 Salary 7500.00	Code KM R	Earning 401k Match Regular	Hours	Rate	Amount 300.00 7500.00	Code FITW IL MED SS	Tax Federal Income T Illinois SITW Medicare OASDI	M-8 M-8	Taxable 6569.40 6569.40 6944.40	Amount 696.68 288.47 100.69	Code 401K 401KL 401KL2 AFLPRE AUTO D4 HSA M-PPO4 V4	Deduction  401K  401K Loan  401K Loan #2  AFLAC - pretax  Auto Reimbursen  Dental - Fam  HSA  BluePreferred PP  Vision - Fam	Amount 375.00 270.00 150.00 113.41 -250.00 34.97 150.00 256.22 1.00	Dir Dep	Reg 12/03/2018 SM1 5313.56 5313.56 0.00 18712
	Total E	arnings	0.00		7500.00	Total Ta	ixes			1085.84	Total Ded	luctions	1100.60		
Boshea Jr,	Code R	Earning	Hours	Rate	Amount 350.00	Code FITW	Tax	Status	Taxable 250.00	Amount	Code	Deduction	Amount	Type Chk Date	Reg 12/03/2018
David J Emp Id 32 Salary 7500.00	K	Regular			330.00	IL MED SS	Federal Income T Illinois SITW Medicare OASDI	M-8	350.00 350.00 350.00	5.07				Batch Net Dir Dep Chk Amt	SM1 344.93 344.93 0.00
	Total E	arnings	0.00	4	350.00	Total Ta	ixes			5.07	Total Ded	luctions	0.00	Chk/Vcr#	18713
Boshea Jr, David J Emp Id 32 Salary 7500.00	Code KM R	Earning 401k Match Regular	Hours	Rate	Amount 300.00 7500.00	Code FITW IL MED SS	Tax  Federal Income T Illinois SITW Medicare OASDI	M-8 M-8	Taxable 6569.40 6569.40 6944.40	Amount 696.68 288.47 100.70	Code 401K 401KL 401KL2 AFLPRE AUTO D4 HSA M-PPO4	Deduction  401K  401K Loan  401K Loan #2  AFLAC - pretax  Auto Reimburser  Dental - Fam  HSA  BluePreferred PP	Amount 375.00 270.00 150.00 113.41 -250.00 34.97 150.00 256.22	Chk Date Batch	Reg 12/17/2018 SM2 5313.55 5313.55 0.00 18822
	Total Ea	arnings	0.00		7500.00	Total Ta	2971			1085.85	V4 Total Ded	Vision - Fam	1.00		
Boshea Jr,	Code	Earning	Hours	Rate	Amount	Code	Tax	Status	Taxable	Amount	Code	Deduction	Amount	Туре	Reg
David J Emp Id 32 Salary 7500.00	R	Regular	nouis	Mic	350.00	FITW IL MED SS	Federal Income T Illinois SITW Medicare OASDI		350.00 350.00 350.00	5.07	Code	Deduction	Amount	Chk Date Batch Net Dir Dep Chk Amt	12/17/2018 SM2 344.93 344.93 0.00
	Total E	arnings	0.00		350.00	Total Ta	ixes			5.07	Total Ded	luctions	0.00	Chk/Vcr#	18823

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Payroll Regi	ster						Compass N	Iarketin ny (175583)	g Inc			Check Date: Process: Period:	01/02/2013 to 2013010201 12/16/2012 to	to 202010190	01 35
Boshea Jr,	Code	Earning	Hours	Rate	Amount	Code	Tax	Status	Taxable	Amount	Code	Deduction	Amount	Type	Reg
David J	KM	401k Match	- 1-1712	157472	300.00	FITW	Federal Income T	M-8	6194.40	601.48	401K	401K	750.00	Chk Date	01/04/2019
Emp Id 32	R	Regular			7500.00	IL	Illinois SITW	M-8	6194.40	269.09	401KL	401K Loan	270.00	Batch	SM1
Salary 7500.00		0.5				MED	Medicare		6944.40	100.69	401KL2	401K Loan #2	150.00	Net	4622.59
						SS	OASDI		6944.40	430.55	AFLPRE	AFLAC - pretax		Dir Dep	4622.59
											AUTO	Auto Reimbursen	-250.00	Chk Amt	0.00
											D4	Dental - Fam	34.97	Chk/Vcr#	18931
											HSA	HSA	150.00		
											M-PPO4	BluePreferred PP	256.22		
	200										V4	Vision - Fam	1.00		
	Total E	arnings	0.00	7.7	7500.00	Total Ta	ixes			1401.81	Total Ded	luctions	1475.60		
Boshea Jr,	Code	Earning	Hours	Rate	Amount	Code	Tax	Status	Taxable	Amount	Code	Deduction	Amount	Type	Reg
David J	R	Regular			350.00	FITW	Federal Income T		350.00					Chk Date	01/04/2019
Emp Id 32						IL	Illinois SITW	M-8	350.00	4.0				Batch	SM1
Salary 7500.00						MED	Medicare		350.00	5.08				Net	323.22
						SS	OASDI		350.00	21.70				Dir Dep	323.22
	Total E	arnings	0.00		350.00	Total Ta	ixes			26.78	Total Ded	luctions	0.00	Chk Amt Chk/Vcr#	0.00 18932
Boshea Jr,	Code	Earning	Hours	Rate	Amount	2.0	Tax	Status	Taxable	Amount	Code	Deduction	Amount	Туре	Reg
David J	HSA	HSA - Employer			3000.00	FITW	Federal Income T		6194.40	601.48	401K	401K	750.00	Chk Date	01/16/2019
Emp Id 32	KM	401k Match			300.00	IL	Illinois SITW	M-8	6194.40	269.09	401KL	401K Loan	270.00	Batch	SM2
Salary 7500.00	R	Regular			7500.00	MED	Medicare		6944.40	100.69	401KL2	401K Loan #2	150.00	Net	4622.58
						SS	OASDI		6944.40	430.56	AFLPRE	AFLAC - pretax			4622.58
											AUTO	Auto Reimbursen	-250.00	Chk Amt	0.00
											D4	Dental - Fam	34.97	Chk/Vcr#	19042
											HSA	HSA	150.00		
											M-PPO4	BluePreferred PP	256.22		
											V4	Vision - Fam	1.00		
	Total E	arnings	0.00		7500.00	Total Ta	ixes			1401.82	Total Ded	luctions	1475.60		
Boshea Jr,	Code	Earning	Hours	Rate	Amount	Code	Tax	Status	Taxable	Amount	Code	Deduction	Amount	Туре	Reg
David J	R	Regular			350.00	FITW	Federal Income T		350.00					Chk Date	01/16/2019
Emp Id 32						IL	Illinois SITW	M-8	350.00					Batch	SM2
Salary 7500.00						MED	Medicare		350.00	5.08				Net	323.22
						SS	OASDI		350.00	21.70				Dir Dep	323.22
					200.00	-								Chk Amt	0.00
	Total E	arnings	0.00		350.00	Total Ta	ixes			26.78	<b>Total Ded</b>	luctions	0.00	Chk/Vcr#	19043

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Payroll Regi	ister						Compass N	Iarketin y (175583)	ng Inc			Check Date: Process: Period:	01/02/2013 to 2013010201 12/16/2012 to	to 202010190	
Boshea Jr,	Code	Earning	Hours	Rate	Amount	Code	Tax	Status	Taxable	Amount	Code	Deduction	Amount	Type	Reg
David J	KM	401k Match	371712	10000	300.00	FITW	Federal Income T		6194.40	601.48	401K	401K	750.00	Chk Date	02/01/2019
Emp Id 32	R	Regular			7500.00	IL	Illinois SITW	M-8	6194.40	269.09	401KL	401K Loan	270.00	Batch	SM1
Salary 7500.00						MED	Medicare		6944.40	100.69	401KL2	401K Loan #2	150.00	Net	4622.59
and agreement of the						SS	OASDI		6944.40	430.55	AFLPRE	AFLAC - pretax		Dir Dep	4622.59
											AUTO	Auto Reimbursen	-250.00	Chk Amt	0.00
											D4	Dental - Fam	34.97	Chk/Vcr#	19176
											HSA	HSA	150.00		
											M-PPO4	BluePreferred PP	256.22		
											V4	Vision - Fam	1.00		
	Total E	arnings	0.00	7.7	7500.00	Total Ta	ixes			1401.81	Total Dec	luctions	1475.60		
Boshea Jr,	Code	Earning	Hours	Rate	Amount	Code	Tax	Status	Taxable	Amount	Code	Deduction	Amount	Туре	Reg
David J	R	Regular			350.00	FITW	Federal Income T		350.00					Chk Date	02/01/2019
Emp Id 32						IL	Illinois SITW	M-8	350.00					Batch	SMI
Salary 7500.00						MED	Medicare		350.00	5.08				Net	323.22
						SS	OASDI		350.00	21.70				Dir Dep	323.22
	Total E	rnings	0.00		350.00	Total Ta	NAC .			26.78	Total Dec	netions	0.00	Chk/Vcr#	0.00 19177
LVCL				-				5000							
Boshea Jr,	Code	Earning	Hours	Rate	Amount	Code	Tax	Status	Taxable	Amount	Code	Deduction	Amount		Reg
David J	KM	401k Match			300.00	FITW	Federal Income T		6194.40	601.48	401K	401K	750.00	Chk Date	02/15/2019
Emp Id 32	R	Regular			7500.00	IL	Illinois SITW	M-8	6194.40	269.09	401KL	401K Loan	270.00		SM2
Salary 7500.00						MED	Medicare		6944.40	100.69	401KL2 AFLPRE	401K Loan #2 AFLAC - pretax	150.00		4622.59
						SS	OASDI		6944.40	430.55	AUTO		113.41		4622.59
											D4	Auto Reimbursen	-250.00		0.00 19294
											HSA	Dental - Fam HSA	150.00	Chk/Vcr#	19294
											M-PPO4	BluePreferred PP	256.22		
											V4	Vision - Fam	1.00		
	Total E	arnings	0.00		7500.00	Total Ta	ixes			1401.81	Total Ded	A 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	1475.60		
Boshea Jr,	Code	Earning	Hours	Rate	Amount	Code	Tax	Status	Taxable	Amount	Code	Deduction	Amount	Type	Reg
David J	R	Regular			350.00	FITW	Federal Income T	- 175 J. J. J. S.	350.00				- Into tall	Chk Date	02/15/2019
Emp Id 32	77	= 10				IL	Illinois SITW	M-8	350.00					Batch	SM2
Salary 7500.00						MED	Medicare	1	350.00	5.08				Net	323.22
						SS	OASDI		350.00	21.70				Dir Dep	323.22
						43.5									
														Chk Amt	0.00

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Employee

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Payroll Regi	ister						Compass N	Iarketin ny (175583)	g Inc			Check Date: Process: Period:	01/02/2013 to 2013010201 12/16/2012 to	to 202010190	01 35
Boshea Jr,	Code	Earning	Hours	Rate	Amount	Code	Tax	Status	Taxable	Amount	Code	Deduction	Amount	Type	Reg
David J	KM	401k Match	371712	10000	300.00	FITW	Federal Income T		6194.40	601.48	401K	401K	750.00	Chk Date	03/01/2019
Emp Id 32	R	Regular			7500.00	IL	Illinois SITW	M-8	6194.40	269.09	401KL	401K Loan	270.00	Batch	SM1
Salary 7500.00						MED	Medicare		6944.40	100.69	401KL2	401K Loan #2	150.00	Net	4622.59
						SS	OASDI		6944.40	430.55	AFLPRE	AFLAC - pretax		Dir Dep	4622.59
											AUTO	Auto Reimbursen	-250.00	Chk Amt	0.00
											D4	Dental - Fam	34.97	Chk/Vcr#	19419
											HSA	HSA	150.00		
											M-PPO4	BluePreferred PP	256.22		
											V4	Vision - Fam	1.00		
	Total E	arnings	0.00	7.7	7500.00	Total Ta	ixes			1401.81	Total Dec	luctions	1475.60		
Boshea Jr,	Code	Earning	Hours	Rate	Amount	Code	Tax	Status	Taxable	Amount	Code	Deduction	Amount	Туре	Reg
David J	R	Regular			350.00	FITW	Federal Income T		350.00					Chk Date	03/01/2019
Emp Id 32						IL	Illinois SITW	M-8	350.00					Batch	SM1
Salary 7500.00						MED	Medicare		350.00	5.07				Net	323.23
						SS	OASDI		350.00	21.70				Dir Dep	323.23
	Total E	arnings	0.00		350.00	Total Ta	2070			26.77	Total Dec	netions	0.00	Chk/Vcr#	0.00 19420
Boshea Jr,	Code	Earning	Hours	Rate		Code	Tax	Status	Taxable	Amount		Deduction			Reg
David J	KM	401k Match	nours	Rate	300.00	FITW	Federal Income T		6194.40	601.48	401K	401K	750.00	Chk Date	03/15/2019
Emp Id 32	R	Regular			7500.00	IL	Illinois SITW	M-8	6194.40	269.09	401KL	401K Loan	270.00		SM2
Salary 7500.00	K	Regulai			7500.00	MED	Medicare	141-0	6944.40	100.70		401K Loan #2	150.00		4622.57
Salary 7500.00						SS	OASDI		6944.40	202217	AFLPRE	AFLAC - pretax	113.41		4622.57
						00	OrioDi		0511.10	150.50	AUTO	Auto Reimbursen	-250.00		0.00
											D4	Dental - Fam		Chk/Vcr#	19532
											HSA	HSA	150.00	CILC VCI II	17002
											M-PPO4	BluePreferred PP	256.22		
											V4	Vision - Fam	1.00		
	Total E	arnings	0.00		7500.00	Total Ta	ixes			1401.83	Total Ded	V 1 1 1 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	1475.60		
Boshea Jr,	Code	Earning	Hours	Rate	Amount	Code	Tax	Status	Taxable	Amount	Code	Deduction	Amount	Type	Reg
David J	R	Regular			350.00	FITW	Federal Income T	M-8	350.00		_			Chk Date	03/15/2019
Emp Id 32						IL	Illinois SITW	M-8	350.00					Batch	SM2
Salary 7500.00						MED	Medicare		350.00	5.07				Net	323.23
						SS	OASDI		350.00	21.70				Dir Dep	323.23
						12.4								Chk Amt	0.00
		arnings	0.00		350.00	Total Ta	170.7.00			26.77	Total Dec		0.00	Chk/Vcr#	19533

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Payroll Regi	ster						Compass N	Iarketin y (175583)	g Inc			Check Date: Process: Period:	01/02/2013 to 2013010201 12/16/2012 to	to 20201019	01 360
Boshea Jr, David J Emp Id 32 Salary 7500.00	Code KM R	Earning 401k Match Regular	Hours	Rate	Amount 300.00 7500.00	FITW IL MED SS	Illinois SITW Medicare OASDI	M-8 M-8	Taxable 6194.40 6194.40 6944.40 6944.40	Amount 601.48 269.09 100.70 430.55	401K 401KL 401KL2 AFLPRE AUTO D4 HSA M-PPO4 V4	Deduction  401K  401K Loan  401K Loan #2  AFLAC - pretax  Auto Reimbursen  Dental - Fam  HSA  BluePreferred PP  Vision - Fam	Amount 750.00 270.00 150.00 113.41 -250.00 34.97 150.00 256.22 1.00	Chk Date Batch	Reg 04/01/2019 SM1 4622.58 4622.58 0.00 19649
	Total E	arnings	0.00		7500.00	Total Ta	ixes			1401.82	Total Ded	luctions	1475.60		
Boshea Jr, David J Emp Id 32 Salary 7500.00	Code R	Earning Regular	Hours	Rate	350.00	FITW IL MED SS	Tax Federal Income T Illinois SITW Medicare OASDI	M-8 M-8	Taxable 350.00 350.00 350.00 350.00	5.07 21.70	Code	Deduction	Amount	Type Chk Date Batch Net Dir Dep Chk Amt	Reg 04/01/2019 SM1 323.23 323.23 0.00
	Total E	arnings	0.00		350.00	Total Ta	ixes			26.77	Total Ded	luctions	0.00	Chk/Vcr#	19650
Boshea Jr, David J Emp Id 32 Salary 7500.00	Code KM R	Earning 401k Match Regular	Hours	Rate	Amount 300.00 7500.00	Code FITW IL MED SS	Tax Federal Income T Illinois SITW Medicare OASDI	Status M-8 M-8	Taxable 6194.40 6194.40 6944.40 6944.40	39 4.20	AUTO D4 HSA M-PPO4 V4	Deduction  401K  401K Loan  AFLAC - pretax  Auto Reimbursen  Dental - Fam  HSA  BluePreferred PP  Vision - Fam	Amount 750.00 284.09 113.41 -250.00 34.97 150.00 256.22 1.00	Type Chk Date Batch Net Dir Dep Chk Amt Chk/Vcr#	Reg 04/16/2019 SM2 4758.49 4758.49 0.00 19765
	Total E	arnings	0.00	Total	7500.00	Total Ta	ixes			1401.82	Total Ded	luctions	1339.69		
Boshea Jr, David J Emp Id 32 Salary 7500.00	Code KM R	Earning 401k Match Regular	Hours	Rate	Amount 300.00 7500.00	Code FITW IL MED SS	Tax Federal Income T Illinois SITW Medicare OASDI	M-8 M-8	Taxable 6194.40 6194.40 6944.40 6944.40		AUTO D4 HSA M-PPO4 V4	Deduction  401K  401K Loan  AFLAC - pretax  Auto Reimbursen  Dental - Fam  HSA  BluePreferred PP  Vision - Fam	Amount 750.00 284.09 113.41 -250.00 34.97 150.00 256.22 1.00	Dir Dep Chk Amt	Reg 05/01/2019 SM1 4758.49 4758.49 0.00 19882
	Total E	arnings	0.00		7500.00	Total Ta	ixes			1401.82	Total Ded	luctions	1339.69		

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Employee

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Payroll Regi	ster						Compass N	Iarketin y (175583)	g Inc			Check Date: Process: Period:	01/02/2013 to 2013010201 12/16/2012 to	to 20201019	01 361
Boshea Jr, David J Emp Id 32 Salary 7500.00	Code KM R	Earning 401k Match Regular	Hours	Rate	Amount 300.00 7500.00	Code FITW IL MED SS	Tax Federal Income T Illinois SITW Medicare OASDI	M-8 M-8	Taxable 6194.40 6194.40 6944.40	Amount 601.48 269.09 100.69 430.55	AUTO	Deduction 401K 401K Loan AFLAC - pretax Auto Reimbursen	Amount 750.00 284.09 113.41 -250.00	Chk Date Batch Net Dir Dep	Reg 05/16/2019 SM2 4758.50 4758.50
											D4 HSA M-PPO4 V4	Dental - Fam HSA BluePreferred PP Vision - Fam	34.97 150.00 256.22 1.00	Chk/Vcr#	0.00 19986
	Total E	arnings	0.00		7500.00	Total Ta	ixes			1401.81	Total Ded	luctions	1339.69		
Boshea Jr, David J Emp Id 32 Salary 7500.00	Code KM R	Earning 401k Match Regular	Hours	Rate		Code FITW IL MED SS	Tax Federal Income T Illinois SITW Medicare OASDI	M-8 M-8	Taxable 6194.40 6194.40 6944.40 6944.40	Amount 601.48 269.09 100.70 430.55	401K 401KL AFLPRE	401K Loan AFLAC - pretax Auto Reimburser	750.00 284.09 113.41 -250.00	Type Chk Date Batch Net Dir Dep	Reg 06/03/2019 SM1 4758.49 4758.49
	Total E		0.00		7500.00	Total Ta				1401.82	D4 HSA M-PPO4 V4 Total Ded	Dental - Fam HSA BluePreferred PP Vision - Fam	34.97 150.00 256.22 1.00 1339.69	Chk/Vcr#	0.00 20095
														TO	
Boshea Jr; David J Emp Id 32 Salary 7500.00	Code KM R	Earning 401k Match Regular	Hours	Rate	300.00 7500.00	Code FITW IL MED SS	Tax Federal Income T Illinois SITW Medicare OASDI	M-8 M-8	Taxable 6194.40 6194.40 6944.40 6944.40	Amount 601.48 269.09 100.69 430.55	401K 401KL AFLPRE	Deduction  401K  401K Loan  AFLAC - pretax  Auto Reimbursen  Dental - Fam  HSA  BluePreferred PP  Vision - Fam	256.22 1.00	Chk Date Batch	Reg 06/17/2019 SM2 4758.50 4758.50 0.00 20197
	Total E	arnings	0.00		7500.00	Total Ta	xes			1401.81	Total Ded	luctions	1339.69		
Boshea Jr; David J Emp Id 32 Salary 7500.00	Code KM R	Earning 401k Match Regular	Hours	Rate		Code FITW IL MED SS	Tax Federal Income T Illinois SITW Medicare OASDI	M-8 M-8	Taxable 6194.40 6194.40 6944.40 6944.40	Amount 601.48 269.09 100.69 430.56	401K 401KL AFLPRE	Deduction  401K  401K Loan  AFLAC - pretax  Auto Reimbursen  Dental - Fam  HSA  BluePreferred PP  Vision - Fam	Amount 750.00 284.09 113.41 -250.00 34.97 150.00 256.22 1.00	Chk Date Batch Net Dir Dep Chk Amt	Reg 07/01/2019 SM1 4758.49 4758.49 0.00 20302
	Total E	arnings	0.00		7500.00	Total Ta	xes			1401.82	Total Ded	luctions	1339.69		

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Payroll Regi	ster						Compass N	Iarketin ny (175583)	g Inc			Check Date: Process: Period:	01/02/2013 to 2013010201 12/16/2012 to	to 20201019	01 362
Boshea Jr.	Code	Earning	Hours	Rate	Amount	Code	Tax	Status	Taxable	Amount	Code	Deduction	Amount	Type	Reg
David J	KM	401k Match		10000	300.00	FITW	Federal Income T	M-8	6194.40	601.48	401K	401K	750.00	Chk Date	07/16/2019
Emp Id 32	R	Regular			7500.00	IL	Illinois SITW	M-8	6194.40	269.09	401KL	401K Loan	284.09	Batch	SM2
Salary 7500.00						MED	Medicare		6944.40	100.70	AFLPRE	AFLAC - pretax	113.41	Net	4758.49
						SS	OASDI		6944.40	430.55	AUTO	Auto Reimbursen	-250.00	Dir Dep	4758.49
											D4	Dental - Fam	34.97	Chk Amt	0.00
											HSA	HSA	150.00	Chk/Vcr#	20428
											M-PPO4	BluePreferred PP	256.22		
											V4	Vision - Fam	1.00		
	Total E	arnings	0.00		7500.00	Total Ta	ixes			1401.82	Total Ded	luctions	1339.69		
Boshea Jr,	Code	Earning	Hours	Rate	Amount	Code	Tax	Status	Taxable	Amount	Code	Deduction	Amount	Type	Reg
David J	KM	401k Match			300.00	FITW	Federal Income T		6194.40	601.48	401K	401K	750.00	Chk Date	08/01/2019
Emp Id 32	R	Regular			7500.00	IL	Illinois SITW	M-8	6194.40	269.09	401KL	401K Loan	284.09	Batch	SMI
Salary 7500.00						MED	Medicare		6944.40	100.69	AFLPRE	AFLAC - pretax	113.41		4758.50
						SS	OASDI		6944.40	430.55		Auto Reimbursen	-250.00		4758.50
											D4	Dental - Fam	34.97	Chk Amt	0.00
											HSA	HSA	150.00	Chk/Vcr#	20541
											M-PPO4	BluePreferred PP	256.22		
	Total E	arnings	0.00		7500.00	Total Ta	Nes .			1401.81	V4 Total Ded	Vision - Fam	1.00		
Boshea Jr.	Code	Earning	Hours	Rate	Amount		Tax	Status	Taxable	Amount		Deduction	Amount	Time	Reg
David J	KM	401k Match	Hours	Nate	300.00	FITW	Federal Income T		6194.40	601.48	401K	401K	750.00	Chk Date	08/16/2019
Emp Id 32	R	Regular			7500.00	IL	Illinois SITW	M-8	6194.40	269.09	401KL	401K Loan	284.09	Batch	SM2
Salary 7500.00		regum			7500.00	MED	Medicare	112 0	6944.40	100.70		AFLAC - pretax	113.41		4758.49
Julia y 7500.00						SS	OASDI		6944.40	430.55		Auto Reimbursen	-250.00	Dir Dep	4758.49
							2.5				D4	Dental - Fam	34.97	Chk Amt	0.00
											HSA	HSA	150.00	Chk/Vcr#	20646
											M-PPO4	BluePreferred PP	256.22		
											V4	Vision - Fam	1.00		
	Total E	arnings	0.00		7500.00	Total Ta	ixes		- A-1 - X-1	1401.82	Total Ded	luctions	1339.69		
Boshea Jr,	Code	Earning	Hours	Rate	Amount		Tax	Status	Taxable	Amount		Deduction	Amount		Reg
David J	KM	401k Match			300.00	FITW	Federal Income T	M-8	6194.40	601.48		401K	750.00	Chk Date	09/03/2019
Emp Id 32	R	Regular			7500.00	IL	Illinois SITW	M-8	6194.40	269.09	401KL	401K Loan	284.09	Batch	SM1
Salary 7500.00						MED	Medicare		6944.40	100.69	AFLPRE	AFLAC - pretax	113.41	Net	4758.49
						SS	OASDI		6944.40	430.56	AUTO	Auto Reimbursen	-250.00	Dir Dep	4758.49
											D4	Dental - Fam	34.97	Chk Amt	0.00
											HSA	HSA	150.00	Chk/Vcr#	20744
											M-PPO4	BluePreferred PP	256.22		
											V4	Vision - Fam	1.00		
	Total E	arnings	0.00		7500.00	Total Ta	ixes			1401.82	Total Ded	luctions	1339.69		

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Payroll Regi	ister						Compass N	larketin y (175583)	g Inc			Check Date: Process: Period:	01/02/2013 to 2013010201 12/16/2012 to	to 20201019	01 363
Boshea Jr,	Code	Earning	Hours	Rate	Amount	Code	Tax	Status	Taxable	Amount	Code	Deduction	Amount	Type	Reg
David J	KM	401k Match			300.00	FITW	Federal Income T	M-8	6194.40	601.48	401K	401K	750.00	Chk Date	09/16/2019
Emp Id 32	R	Regular			7500.00	IL	Illinois SITW	M-8	6194.40	269.09	401KL	401K Loan	284.09	Batch	SM2
Salary 7500.00						MED	Medicare		6944.40	100.69	AFLPRE	AFLAC - pretax	113.41	Net	4758.50
						SS	OASDI		6944.40	430.55		Auto Reimbursen	-250.00	Dir Dep	4758.50
											D4	Dental - Fam	34.97	Chk Amt	0.00
											HSA	HSA	150.00	Chk/Vcr#	20847
											M-PPO4	BluePreferred PP	256.22		
	Total E	11111 84720	0.00		7500.00	Total Ta				1401.81	V4 Total Ded	Vision - Fam	1.00		
0.0-0				-					4-12						-
Boshea Jr,	Code KM	Earning 401k Match	Hours	Rate	Amount 300.00	Code FITW	Tax Federal Income T	Status	Taxable	Amount 601.48		Deduction 401K	Amount		Reg
David J Emp Id 32	R				7500.00	IL.	Illinois SITW	M-8	6194.40 6194.40	269.09	401KL	401K Loan	750.00 284.09	Chk Date Batch	10/01/2019 SM1
Salary 7500.00	K	Regular			7300.00	MED	Medicare	IVI-6	6944.40	100.70		AFLAC - pretax	113.41		4851.09
State 7500.00						SS	OASDI		5450.80	337.95		Auto Reimbursen	-250.00	Dir Dep	4851.09
						55	OnioDi		5150.00	331.33	D4	Dental - Fam	34.97	Chk Amt	0.00
											HSA	HSA	150.00	Chk/Vcr#	20948
											M-PPO4	BluePreferred PP	256.22		
											V4	Vision - Fam	1.00		
	Total E	arnings	0.00		7500.00	Total Ta	ixes			1309.22	Total Dec	luctions	1339.69		
Boshea Jr,	Code	Earning	Hours	Rate	Amount	Code	Tax	Status	Taxable	Amount		Deduction	Amount		Reg
David J	KM	401k Match			300.00	FITW	Federal Income T		6569.40	683.98		401K	375.00	Chk Date	10/16/2019
Emp Id 32	R	Regular			7500.00	IL	Illinois SITW	M-8	6569.40	287.65		401K Loan	284.09	Batch	SM2
Salary 7500.00						MED	Medicare		6944.40	100.69		AFLAC - pretax	113.41	7777	5462.99
						SS	OASDI				AUTO D4	Auto Reimbursen Dental - Fam	-250.00 34.97	Dir Dep Chk Amt	5462.99 0.00
											HSA	HSA	150.00		21048
											M-PPO4	BluePreferred PP	256.22	CIR VCI II	21040
											V4	Vision - Fam	1.00		
	Total E	arnings	0.00		7500.00	Total Ta	ixes			1072.32	Total Dec	luctions	964.69		
Boshea Jr,	Code	Earning	Hours	Rate	Amount	Code	Tax	Status	Taxable	Amount	Code	Deduction	Amount	Type	Reg
David J	KM	401k Match			300.00	FITW	Federal Income T	M-8	6569.40	683.98	401K	401K	375.00	Chk Date	11/01/2019
Emp Id 32	R	Regular			7500.00	IL	Illinois SITW	M-8	6569.40	287.65	401KL	401K Loan	284.09	Batch	SM1
Salary 7500.00						MED	Medicare		6944.40	100.69		401K Loan #2	50.14		5412.85
						SS	OASDI				AFLPRE	AFLAC - pretax		Dir Dep	5412.85
											AUTO	Auto Reimbursen	-250.00	Chk Amt	0.00
											D4	Dental - Fam	34.97	Chk/Vcr#	21152
											HSA	HSA	150.00		
											M-PPO4 V4	BluePreferred PP Vision - Fam	256.22 1.00		
	Total E	a uminas	0.00		7500.00	Total Ta				1072.32	Total Ded		1014.83		
	Iotal L	и пшёэ	0.00		/300.00	Total 12	IAC3			10/2.32	Total Dec	шения	1014.03		

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Employee

Payroll Regi	ster						Compass N	larketin y (175583)	ng Inc			Check Date: Process: Period:	201/02/2013 to 10/19/2020 Page 2013010201 to 2020101901 364 12/16/2012 to 10/19/2020			
Boshea Jr, David J Emp Id 32 Salary 7500.00	Code KM R	Earning 401k Match Regular	Hours	Rate	Amount 300.00 7500.00	Code FITW IL MED SS	Tax Federal Income T Illinois SITW Medicare OASDI	Status M-8 M-8	Taxable 6569.40 6569.40 6944.40	Amount 683.98 287.65 100.70	401K 401KL	Deduction 401K 401K Loan 401K Loan #2 AFLAC - pretax Auto Reimbursen Dental - Fam HSA BluePreferred PP Vision - Fam	Amount 375.00 284.09 50.14 113.41 -250.00 34.97 150.00 256.22 1.00	Chk Date Batch	Reg 11/18/2019 SM2 5412.84 5412.84 0.00 21250	
	Total Earnings		0.00 7500.0		7500.00	00 Total Taxes			1072.33	Total Dec	The state of the s	1014.83				
Boshea Jr,	Code	Earning	Hours	Rate	Amount	Code	Tax	Status	Taxable	Amount	Code	Deduction	Amount	Type	Reg	
David J Emp Id 32 Salary 7500.00	KM R	401k Match Regular			300.00 7500.00	FITW IL MED SS	Federal Income T Illinois SITW Medicare OASDI	M-8 M-8	6569.40 6569.40 6944.40	683.98 287.65 100.69	401K 401KL 401KL2 AFLPRE AUTO D4 HSA M-PPO4 V4	401K Loan 401K Loan #2 AFLAC - pretax Auto Reimbursen Dental - Fam HSA BluePreferred PP Vision - Fam	375.00 284.09 50.14 113.41 -250.00 34.97 150.00 256.22 1.00	Chk Date Batch Net Dir Dep Chk Amt	12/02/2019 SM1 5412.85 5412.85 0.00 21366	
	Total Earnings		0.00	-	7500.00	Total Ta	xes			1072.32	Total Ded	luctions	1014.83			
Boshea Jr, David J Emp Id 32 Salary 7500.00	Code KM R	Earning 401k Match Regular	Hours	Rate	Amount 300.00 7500.00	Code FITW IL MED SS	Tax Federal Income T Illinois SITW Medicare OASDI	M-8 M-8 M-8	Taxable 6569.40 6569.40 6944.40	Amount 683.98 287.65 100.70	401KL 401KL 401KL2 AFLPRE AUTO D4 HSA	401K Loan 401K Loan 401K Loan #2 AFLAC - pretax Auto Reimburser Dental - Fam HSA	Amount 375.00 284.09 50.14 113.41 -250.00 34.97 150.00	Chk Date Batch Net Dir Dep Chk Amt	Reg 12/16/2019 SM2 5412.84 5412.84 0.00 21464	
											M-PPO4 V4	BluePreferred PP Vision - Fam	256.22 1.00			
	Total E	arnings	0.00		7500.00	Total Taxes 1072.33					Total Ded	T105722200 COMM	1014.83			
Boshea Jr,	Code	Earning	Hours	Rate	Amount	Code	Tax	Status	Taxable	Amount	Code	Deduction	Amount	Type	Reg	
David J Emp Id 32 Salary 7500.00	KM R	401k Match Regular		Nate	300.00 7500.00	FITW IL MED SS	Federal Income T Illinois SITW Medicare OASDI		6558.87 6558.87 6933.87	681.66 287.13 100.54	401K 401KL 401KL2 AFLPRE AUTO D4 HSA M-PPO4 V4	401K Loan 401K Loan #2 AFLAC - pretax Auto Reimbursen Dental - Fam HSA BluePreferred PP Vision - Fam	375.00 284.09 50.14 113.41 -250.00 42.67 150.00 256.28 3.77	Chk Date Batch Net Dir Dep	12/31/2019 SM1 5405.31 5405.31 0.00 21551	
	Total E	arnings	0.00		7500.00	Total Ta	xes			1069.33	Total Ded	luctions	1025.36			

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Payroll Regi	ster						Compass N	Iarketin y (175583)	g Inc			Check Date: Process: Period:	201/02/2013 to 10/19/2020 Page 2013010201 to 2020101901 365 12/16/2012 to 10/19/2020			
Boshea Jr, David J Emp Id 32 Salary 7500.00	Code KM R	Earning 401k Match Regular	Hours	Rate	Amount 300.00 7500.00	Code FITW IL MED SS	Tax Federal Income T Illinois SITW Medicare OASDI	Status M-8 M-8	Taxable 6558.87 6558.87 6933.87 6933.87	Amount 667.70 286.30 100.54 429.90	401K 401KL 401KL2	Deduction 401K 401K Loan 401K Loan #2 AFLAC - pretax Auto Reimbursen Dental - Fam HSA BluePreferred PP Vision - Fam	Amount 375.00 284.09 50.14 113.41 -250.00 42.67 150.00 256.28 3.77	Chk Date Batch	Reg 01/16/2020 SM2 4990.20 4990.20 0.00 21640	
	Total Earnings		0.00	7500.00		Total Taxes 1484.44					Total Ded	The state of the s	1025.36			
Boshea Jr,	Code	Earning	Hours	Rate	Amount	Code	Tax	Status	Taxable	Amount	Code	Deduction	Amount	Type	Reg	
David J Emp Id 32 Salary 7500.00	KM R	401k Match Regular			300.00 7500.00	FITW IL MED SS	Federal Income T Illinois SITW Medicare OASDI		6558.87 6558.87 6933.87 6933.87	667.70 286.30 100.54	401K 401KL 401KL2 AFLPRE AUTO D4 HSA M-PPO4 V4	401K Loan 401K Loan #2 AFLAC - pretax Auto Reimbursen Dental - Fam HSA BluePreferred PP Vision - Fam	375.00 284.09 50.14 113.41 -250.00 42.67 150.00 256.28 3.77	Chk Date Batch Net Dir Dep Chk Amt	02/03/2020 SM1 4990.20 4990.20 0.00 21738	
	Total E	arnings	0.00		7500.00	Total Ta	ixes			1484.44	Total Ded	luctions	1025.36			
Boshea Jr, David J Emp Id 32 Salary 7500.00	Code KM R	Earning 401k Match Regular	Hours	Rate	Amount 300.00 7500.00	Code FITW IL MED SS	Tax  Federal Income T Illinois SITW Medicare OASDI	M-8 M-8	Taxable 6408.87 6408.87 6933.87 6933.87		401K 401KL 401KL2 AFLPRE AUTO D4 HSA M-PPO4 V4	Deduction  401K  401K Loan  401K Loan #2  AFLAC - pretax  Auto Reimbursen  Dental - Fam  HSA  BluePreferred PP  Vision - Fam	Amount 525.00 284.09 50.14 113.41 -250.00 42.67 150.00 256.28 3.77	Chk Date Batch Net Dir Dep Chk Amt	Reg 02/18/2020 SM2 4880.62 4880.62 0.00 21821	
	Total Earnings 0.00 7500.00					Total Taxes 1444.02						luctions	1175.36			
Boshea Jr, David J Emp Id 32 Salary 7500.00	Code KM R	Earning 401k Match Regular	Hours	Rate	Amount 300.00 7500.00	Code FITW IL MED SS	Tax Federal Income T Illinois SITW Medicare OASDI	Status M-8 M-8	Taxable 6408.87 6408.87 6933.87 6933.87	Amount 634.70 278.88 100.54 429.90		Deduction  401K  401K Loan  401K Loan #2  AFLAC - pretax  Auto Reimbursen  Dental - Fam  HSA  BluePreferred PP  Vision - Fam	Amount 525.00 284.09 50.14 113.41 -250.00 42.67 150.00 256.28 3.77	Chk Date Batch Net Dir Dep	Reg 03/02/2020 SM1 4880.62 4880.62 0.00 21904	
	Total Earnings 0.00				7500.00	Total Ta	(W.s.			1444.02	Total Ded		1175.36			

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Payroll Regi	ster					Compass Marketing Inc Company (175583)						Process:	01/02/2013 to 2013010201 12/16/2012 to	01 36	
Boshea Jr,	Code	Earning	Hours	Rate	Amount	Code	Tax	Status	Taxable	Amount	Code	Deduction	Amount	Туре	Reg
David J	R	Regular	16.00		1384.64	FITW	Federal Income T	M-8	1124.59		M-PPO4	BluePreferred PP	256.28	Chk Date	03/16/2020
Emp Id 32						IL	Illinois SITW	M-8	1124.59	17.30	V4	Vision - Fam	3.77	Batch	SM2
Rate 0.0000						MED	Medicare		1124.59	16.31				Net	1021.26
						SS	OASDI		1124.59	69.72				Dir Dep	1021.26
														Chk Amt	0.00
	Total Earnings		16.00		1384.64	Total Taxes			103.33	Total Deductions 260.05		260.05	Chk/Vcr#	21983	
Boshea Jr,	Code	Earning	Hours	Rate	Amount	Code	Tax	Status	Taxable	Amount	Code	Deduction	Amount	Type	Reg
David J	V	Vacation	76.00		6577.04	FITW	Federal Income T	M-8	6577.04	671.70	-			Chk Date	03/16/2020
Emp Id 32						IL	Illinois SITW	M-8	6577.04	287.20				Batch	SM2
Rate 0.0000						MED	Medicare		6577.04	95.37				Net	5114.99
						SS	OASDI		6577.04	407.78				Dir Dep	5114.99
														Chk Amt	0.00
	Total Ea	arnings	76.00		6577.04	Total Ta	ixes			1462.05	Total Ded	uctions	0.00	Chk/Vcr#	21984

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